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<1>

Authors

Kabesch M. Hoefler C. Carr D. Leupold W. Weiland SK. von Mutius E.

Title

Glutathione S transferase deficiency and passive smoking increase childhood asthma

Source

Thorax. 59(7):569-573, 2004 Jul.

Abstract

Background: It has been suggested that the genetically determined deficiency of glutathione S transferase (GST) enzymes involved in the detoxification of environmental tobacco smoke (ETS) components may contribute to the development of asthma.

Methods: A large population of German schoolchildren (n = 3054) was genotyped for deficiencies of the GST isoforms M1 and T1. The association between GSTM1 and GSTT1 genotypes and asthma as well as atopy was investigated with respect to current and in utero ETS exposure.

Results: In children lacking the GSTM1 allele who were exposed to current ETS the risk for current asthma (OR 5.5, 95% CI 1.6 to 18.6) and asthma symptoms such as wheeze ever (OR 2.8, 95% CI 1.3 to 6.0), current wheezing (OR 4.7, 95% CI 1.8 to 12.6) and shortness of breath (OR 8.9, 95% CI 2.1 to 38.4) was higher than in GSTM1 positive individuals without ETS exposure. Hints of an interaction between ETS exposure and GSTM1 deficiency were identified. In utero smoke exposure in GSTT1 deficient children was associated with significant decrements in lung function compared with GSTT1 positive children not exposed to ETS.

Conclusions: GSTM1 and GSTT1 deficiency may increase the adverse health effects of in utero and current smoke exposure. [References: 25]

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<2>

Authors

Ivan CS. Seshadri S. Beiser A. Au R. Kase CS. Kelly-Hayes M. Wolf PA.

Title

Dementia after stroke - The Framingham Study

Source

Stroke. 35(6):1264-1268, 2004 Jun.

Abstract

Background and Purpose-Identification of risk factors for dementia after stroke is best performed in comparison with stroke-free controls, because older subjects at high risk for stroke also have a substantial risk of dementia in the absence of stroke. Previous case-control studies were

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hospital-based. We used a nested case-control design to prospectively evaluate these risk factors in the community-based Framingham Study cohort.

Methods-We compared 212 subjects who were free of dementia in January 1982 and sustained a first stroke after this date, with 1060 age- and sex-matched, stroke- and dementia-free controls. We calculated 10-year risks of dementia (by Diagnostic and Statistical Manual of Mental Disorders, Volume IV criteria) developing in cases and controls and also estimated the hazard ratios within subgroups defined by exposure to various demographic factors (age, gender, education), stroke-related features (right or left hemisphere, stroke type, second stroke), stroke risk factors (hypertension, diabetes, atrial fibrillation, smoking) and apolipoprotein E genotype.

Results-Dementia developed in 19.3% of cases and 11.0% of controls. Baseline stroke doubled the risk of dementia (hazard ratio [HR]: 2.0; 95% confidence interval [CI]: 1.5 to 3.1) and adjustment for age, sex, education, and exposure to individual stroke risk factors did not diminish the risk (HR: 2.4; 95% CI: 1.6 to 3.7). The HR was higher in younger subjects (age younger than 80 years [HR: 2.6; 95% CI: 1.5 to 4.5]), apolipoprotein E 3/3 homozygotes (HR: 3.4; 95% CI: 2.0 to 5.8), and high school graduates (HR: 2.4; 95% CI: 1.5 to 3.9).

Conclusion-Stroke increases a subject's risk of dementia as compared with age- and sex-matched controls. Primary and secondary prevention of stroke should significantly decrease the risk of all dementia. [References: 28]

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<3>

Authors

Ayoub N. Esposito G. Barete S. Soria C. Piette JC. Frances C.

Title

Protein Z deficiency in antiphospholipid-negative Sneddon's syndrome

Source

Stroke. 35(6):1329-1332, 2004 Jun.

Abstract

Background-Sneddon's syndrome is characterized by the association of ischemic cerebrovascular events and widespread livedo racemosa. The pathophysiology of Sneddon's syndrome remains elusive, but various prothrombotic abnormalities have been previously reported in this setting. Low levels of protein Z, a downregulator of coagulation, have been recently linked to an increased risk of arterial thrombosis. The purpose of this study was to investigate the levels of protein Z in a series of Sneddon's syndrome patients without circulating antiphospholipid antibodies in comparison with an age- and sex-matched control population.

Methods-Twenty-six patients and 78 healthy controls had determination of their protein Z blood levels by an enzyme-linked immunoassay test. Patients' thrombotic and vascular risk factors, including tobacco smoking, arterial hypertension, oral contraceptive agents, dyslipidemia, factor V Leiden, and factor II mutation were recorded.

Results-Protein Z plasma levels were significantly lower in patients (mean 1.47 mg/L) than in controls (mean 1.93 mg/L) (P = 0.02). Prevalence of protein Z deficiency (level <1 mg/L) was significantly higher (P = 0.001) among patients (31%) than among controls (3.8%). Factor V Leiden and heavy

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smoking were observed in 4 and 7 patients, respectively.

Conclusions-Sneddon's syndrome could be viewed as the peculiar clinical expression of various and sometimes associated coagulation abnormalities. Low levels of protein Z may account, at least partly, for the thrombotic events observed in Sneddon's syndrome and shed a new light on its pathophysiology. Clinical implications for protein Z deficiency in this setting deserve further investigations. [References: 19]

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<4>

Authors

Grauer JN. Vaccaro AR. Kato M. Kwon BK. Beiner JM. Patel TC.
Hilibrand AS. Chiba K. Albert TJ.

Title

Development of a New Zealand white rabbit model of spinal pseudarthrosis repair and evaluation of the potential role of OP-1 to overcome pseudarthrosis

Source

Spine. 29(13):1405-1412. 2004 Jul 1.

Abstract

Study Design. Posterolateral lumbar fusions were performed in nicotine-exposed, New Zealand white rabbits. Animals that developed a pseudarthrosis were then regrafted with no graft, autograft, or osteogenic protein-1 (OP-1).

Objectives. To establish a model of pseudarthrosis repair and to evaluate the ability of OP-1 to induce fusion in this model.

Summary of Background Data. OP-1 has been shown to have a 100% fusion rate in an established rabbit fusion model, even in the presence of nicotine, which is known to inhibit fusion.

Methods. Forty-four New Zealand white rabbits underwent posterolateral lumbar fusion with iliac crest autograft. To maximize the incidence of pseudarthroses, nicotine was administered to all rabbits. At 5 weeks, the spines were explored, and all pseudarthroses were redecorticated and grafted with no graft, autograft, or OP-1. At 10 weeks, the rabbits were killed and fusion masses were assessed with manual palpation, radiography, computed tomography, and/or histology.

Results. Nine rabbits (20%) were lost to complications. Thirty-four (94%) had pseudarthroses on exploration at 5 weeks. By manual palpation at 10 weeks, 1 of 10 (10%) pseudarthroses that received no graft fused, 5 of 12 (42%) pseudarthroses that received autograft fused, and 9 of 11 (82%) pseudarthroses that received OP-1 fused. Computed tomography and histology further characterized the fusion masses.

Conclusions. This study establishes a model for treatment of pseudarthroses. OP-1, which has previously been shown to have 100% fusion rate in animal models, outperformed autograft and induced fusion in 82% of rabbits. [References: 23]

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Authors

Qamar AM.

Title

Smoking and Islam

Source

Scientist. 18(13):10. 2004 Jul 5.

Publication Type

Letter

This link leads to available full-text or the complete reference.
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<6>

Authors

Paris C. Benichou J. Raffaelli C. Genevois A. Fournier L. Menard G.
Broessel M. Ameille J. Brochard P. Gillon JC. Gislard A. Letourneux M.

Title

Factors associated with early-stage pulmonary fibrosis as determined by high-resolution computed tomography among persons occupationally exposed to asbestos

Source

Scandinavian Journal of Work, Environment & Health. 30(3):206-214. 2004 Jun.

Abstract

Objectives Asbestosis remains difficult to diagnose, particularly in its early stages. The aim of this study was to determine criteria for independently associated features of pulmonary fibrosis in high-resolution computed tomograms among persons occupationally exposed to asbestos.

Methods Retired persons with documented occupational asbestos exposure and no known asbestos-related diseases were assessed for occupational, clinical, functional respiratory, and chest X-ray criteria. In addition, they all underwent high-resolution computed tomography (HRCT) in the prone position.

Results Altogether 51 (7.2%) of the 706 enrolled participants had features of pulmonary fibrosis consistent with asbestosis in the HRCT. Among those with small irregular opacities of <1/0 according to the 1980 International Labour Office Classification (ILO-C) in their X-rays, 5% had asbestosis in the HRCT. In a multivariate analysis, only age [odds ratio (OR) per year 1.08, 95% confidence interval (95% CI) 1.02-1.14], cumulative-exposure index (CEI) for asbestos (OR 6.4, 95% CI 1.5-28.4 for a CEI of greater than or equal to 100 fibers/ml x years), and the presence of small irregular X-ray opacities of greater than or equal to 1/0 ILO-C (OR 3.0, 95% CI 1.6-6.0) were independently associated with HRCT asbestosis. No combinations of these criteria simultaneously yielded high sensitivity and specificity for the diagnosis of early-stage HRCT asbestosis. Moreover, only 2% of the persons with a CEI of <25 fibers/ml x years had HRCT asbestosis, the finding confirming the low incidence of asbestosis for such low exposure, as previously reported on the basis of X-ray data.

Conclusions Additional research is needed to better identify the persons most likely to benefit from HRCT screening for asbestosis. [References: 36]

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<7>

Authors

Franke A. Teyssen S. Harder H. Singer MV.

Title

Effect of ethanol and some alcoholic beverages on gastric emptying in humans

Source

Scandinavian Journal of Gastroenterology. 39(7):638-644, 2004 Jul.

Abstract

Background: There is a paucity of detailed and controlled studies on the action of ethanol and alcoholic beverages on gastric emptying in humans. This study was designed to compare the effect of beer, red wine, whisky and their comparable pure ethanol solutions on gastric emptying in a controlled and randomized investigation. Methods: On separate days, 10 healthy, fasted subjects received the following solutions, in random order, through a gastric tube: 500 mL beer, red wine, comparable pure ethanol solutions (4% and 10% v/v), glucose (5.5% and 11.4% w/v) and water, 125 mL whisky and 40% (v/v) ethanol (both followed by 125 mL water) and 250 mL water. Gastric emptying of the test solutions was assessed using ultrasonography of the antrum. Results: As measured by ultrasonography of the antrum, half emptying times of the ethanol solutions (4%, 10% and 40% v/v) were significantly ($P < 0.05$) longer (22.6 \pm 4.8, 22.7 \pm 4.3 and 27.8 \pm 3.3 min, respectively, $n = 10$) than those of water (14.6 \pm 1.9 min (500 mL) and 13.2 \pm 1.7 min (250 mL), respectively). The half emptying times of beer (39.3 \pm 4.3 min) and red wine (72.6 \pm 7.6 min) were significantly longer than those of the corresponding ethanol concentrations, whereas whisky was emptied at nearly the same rate (26.4 \pm 5.9 min) as 40% (v/v) ethanol. Emptying of glucose 5.5% and 11.4% (w/v) was significantly and dose dependently slower (29.7 \pm 4.5 and 64.8 \pm 8.9 min) than water. Conclusions: 1) Pure ethanol in concentrations of 4%, 10% and 40% (v/v) inhibits gastric emptying. 2) The inhibitory effect of beer and red wine, but not of whisky, is stronger than that of their comparable ethanol concentrations. 3) Caloric content and non-alcoholic ingredients in alcoholic beverages produced by fermentation (beer and wine), but not in those produced by distillation (whisky), are most likely responsible for this effect. [References: 30]

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Authors

Agrawal AK. Singh SK. Sinha S. Shukla MK.

Title

Effect of EGR on the exhaust gas temperature and exhaust opacity in compression ignition engines

Source

Sadhana-Academy Proceedings in Engineering Sciences. 29(Part 3):275-284, 2004 Jun.

Abstract

In diesel engines, NO_x formation is a highly temperature-dependent phenomenon and takes place when the temperature in the combustion chamber exceeds 2000 K. Therefore, in order to reduce NO_x emissions in the

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exhaust, it is necessary to keep peak combustion temperatures under control.

One simple way of reducing the NO_x emission of a diesel engine is by late injection of fuel into the combustion chamber. This technique is effective but increases fuel consumption by 10-15%, which necessitates the use of more effective NO_x reduction techniques like exhaust gas recirculation (EGR). Re-circulating part of the exhaust gas helps in reducing NO_x, but appreciable particulate emissions are observed at high loads, hence there is a trade-off between NO_x and smoke emission. To get maximum benefit from this trade-off, a particulate trap may be used to reduce the amount of unburnt particulates in EGR, which in turn reduce the particulate emission also.

An experimental investigation was conducted to observe the effect of exhaust gas re-circulation on the exhaust gas temperatures and exhaust opacity. The experimental setup for the proposed experiments was developed on a two-cylinder, direct injection, air-cooled, compression ignition engine. A matrix of experiments was conducted for observing the effect of different quantities of EGR on exhaust gas temperatures and opacity. [References: 10]

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<9>

Authors

Maeda Y. Okita W. Ichimura K.

Title

Increased nasal patency caused by smoking and contraction of isolated human nasal mucosa

Source

Rhinology. 42(2):63-67, 2004 Jun.

Abstract

In this study, we investigated the effects of smoking and nicotine, an important constituent of cigarettes, on the nasal patency using acoustic rhinometry (AR) and an in vitro bioassay technique. In the AR study, the nasal cavity volume of volunteers classified into two groups, smoking and nicotine chewing gum groups, was measured. The nasal cavity volumes immediately after smoking and 5 minutes after smoking significantly increased compared with that before smoking ($P < 0.05$), whereas the nasal cavity volume after chewing a nicotine gum was unchanged compared with that before chewing the gum. An in vitro study showed significant nicotine-induced contraction of the human nasal mucosa (50.2 \pm 14.0% noradrenaline-induced contraction; $n = 10$). The threshold nicotine level that can induce human nasal mucosa contraction was 3.0×10^{-7} M. Prazosin (10^{-6} M) inhibited nicotine-induced contraction incompletely (20.5 \pm 7.5% of noradrenaline-induced contraction; $n = 5$). These results indicate that smoking increases nasal patency and that nicotine induces contraction of the human nasal mucosa. The nicotine-induced contraction is likely mediated, at least in part by alpha-adrenoceptors. [References: 23]

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Authors

Watts RA. Mooney J. Lane SE. Scott DGI.

Title

Rheumatoid vasculitis: becoming extinct?

Source

Rheumatology. 43(7):920-923, 2004 Jul.

Abstract

Background. Systemic rheumatoid vasculitis (SRV) is a relatively rare complication of RA. The incidence of SRV appeared to increase during the 1970s and 1980s from 6.0 to 12.5/million. During the 1990s there have been major changes in the treatment of RA, with more aggressive control of inflammation. Our aim was to study the epidemiology of SRV in a stable, well-defined population over a 15-yr period.

Methods. Since 1988 we have maintained a prospective register of all patients with systemic vasculitis attending the Norfolk and Norwich University Hospital. Patients presenting with new-onset SRV, as defined by the criteria of Scott and Bacon, and registered with general practitioners in the former Norwich Health Authority area between 1988 and 2002 were identified. The population in 2002 was estimated to be 445 000 (215 000 males).

Results. Fifty-one patients (24 male) with SRV were identified, with median age 61 yr and disease duration 16.8 yr. The overall annual incidence was 7.9/million (95% CI 5.9-10.4) (males, 7.7/million; females, 8.1/million). During the first quinquennium (1988-92) the incidence was 11.6/million (95% CI 7.4-17.0) and during the third (1998-2002) it was 3.6/million (95% CI 1.6-7.1). A rolling 3-yr average showed that the peak incidence was in 1992-94, at 15.2/million (95% CI 9.1-23.8), and the nadir was in 1998-2000, at 3.0/million (95% CI 0.8-7.8). A similar pattern was seen for males and females. There was no difference in age or disease duration at onset of SRV between the three quinquennia.

Conclusions. The incidence of SRV has declined dramatically since the 1980s. This could be due to better control of inflammatory disease or changes in smoking habits. [References: 14]

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<11>

Authors

Boudinot E. Emery MJ. Mouisel E. Chatonnet A. Champagnat J. Escourrou P. Foutz AS.

Title

Increased ventilation and CO₂ chemosensitivity in acetylcholinesterase knockout mice

Source

Respiratory Physiology & Neurobiology. 140(3):231-241, 2004 Jun 25.

Abstract

To investigate the effects of a permanent excess of acetylcholine (AChE) on respiration, breathing and chemosensitivity were analyzed from birth to adulthood in mice lacking the AChE gene (AChE^{-/-}), in heterozygotes, and in control wild-type (AChE^{+/+}) littermates. Breathing at rest and ventilatory responses to brief exposures to hypoxia (10% O₂) and hypercapnia (3-5% CO₂) were measured by whole-body plethysmography. At rest AChE^{-/-} mice show larger tidal volumes (V-T, +90% in adults),

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overall ventilation (V-E, +70%), and mean inspiratory flow (+270%) than wild-type mice, with no change in breathing frequency (f(R)). AChE^{-/-} mice have a slightly blunted response to hypoxia, but increased V-E and f(R) responses to hypercapnia. Heterozygous animals present no consistent alterations of breathing at rest and chemosensitivity is normal. Adult AChE^{-/-} mice have an increased V-E/V-O₂ and a marginally higher normalized V-O₂. The results suggest that the hyperventilation and altered chemosensitivity in AChE^{-/-} mice largely reflect alterations of central respiratory control. (C) 2004 Elsevier B.V. All rights reserved.

[References: 63]

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<12>

Authors

Lærum BN. Svanes C. Guisvik A. Iversen M. Thorarinsdottir HR. Gislason T. Jogi R. Norrman E. Gunnbjornsdottir M. Wentzel-Larsen T. Janson C. Omenaas E.

Title

Is birth weight related to lung function and asthma symptoms in Nordic-Baltic adults?

Source

Respiratory Medicine. 98(7):611-618, 2004 Jul.

Abstract

Studies of birth characteristics and respiratory outcomes show contradictory findings. We wanted to investigate the association of birth weight with adult lung function as well as asthma symptoms while addressing the influence of demographic and environmental factors.

Data was collected from the birth records of 1683 men and women born in 1947/1973 who were included in 6 Nordic-Baltic population samples investigated within the European Community Respiratory Health Survey (ECRHS).

In the adults, an increase in birth weight from below 2500 g to above 4000g was associated with an increase from 96% to 104% predicted one-second forced expiratory volume (P<0.01) and from 100% to 107% predicted forced vital capacity (P<0.01). However, birth weight was not associated with symptoms of asthma. After adjustment for birth length, gender, age, study centre, adult BMI, allergic rhinitis, parental and adult tobacco smoke exposure in multivariate regression analyses, birth weight was not associated with adult lung function or asthma symptoms. Further sub-sample analyses revealed no influence of gestational age, gender, age or geographical area.

In this historic prospective cohort study an association was neither found between birth weight and adult lung function nor between birth weight and asthma symptoms. (C) 2004 Elsevier Ltd. All rights reserved. [References: 24]

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Authors
Bucchioni E. Csoma Z. Allegra L. Chung KF. Barnes PJ. Kharitonov SA.

Title
Adenosine 5'-monophosphate increases levels of leukotrienes in breath condensate in asthma

Source
Respiratory Medicine. 98(7):651-655, 2004 Jul.

Abstract

Hyperresponsiveness (AHR) is a key physiological abnormality in asthma. In clinical and research studies AHR is measured bronchial challenge, with methacholine (MCh), but more recently with adenosine-5-monophosphate (AMP).

In the search for markers of airway inflammation in asthmatic patients, we measured the concentrations of histamine and cysteinyl-leukotrienes (cys-LTs) before and after MCh and AMP challenges in the exhaled breath condensate of 13 patients with mild asthma (FEV1 78.5%pred) and nine healthy non-smokers, using specific enzyme immunoassays.

With methacholine challenge we did not find any differences between asthmatics and normal subjects in the pre- and post-challenge concentrations of cys-LTs: 27.2 +/- 1.4 vs. 29.2 +/- 1.2pg/ml and 26.3 +/- 2.2 vs. 27.5 +/- 4.2pg/ml, respectively or histamine: 5.1 +/- 0.4 vs. 5.1 +/- 0.6nm and 4.5 +/- 0.4 vs. 4.4 +/- 0.3nm; P>0.05). In asthmatic patients cys-LT levels were significantly higher after AMP challenge (56.2 +/- 9.7 vs. 31.7 +/- 6.9pg/ml; P<0.05); but there was no difference in healthy subjects (27.2 +/- 4.6 vs. 30.3 +/- 4.7pg/ml). There was no difference in histamine concentrations in asthmatic (5.9 +/- 1.8 vs. 4.5 +/- 0.5 nm), or healthy subjects (5.5 +/- 0.4 vs. 5.7 +/- 0.9 nm) after AMP challenge.

In conclusion, our results show that the cys-LTs are increased in exhaled breath condensate after AMP challenge, which may indicate that the AMP acts indirectly by releasing cys-LTs from primed mast cells. The detection of LTs and histamine in exhaled breath condensate may be useful in monitoring asthma. (C) 2004 Elsevier Ltd. All rights reserved.

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<14>

Authors

McLaughlin JK. Wise TN. Lipworth L.

Title
Increased risk of suicide among patients with breast implants: Do the epidemiologic data support psychiatric consultation?

Source
Psychosomatics. 45(4):277-280, 2004 Jul-Aug.

Abstract

Four epidemiologic studies have examined mortality among women with cosmetic silicone gel-filled breast implants and have found that risk of death from suicide is two- to threefold higher in this group than among women of comparable age in the general population. The authors review the literature on the psychological and psychiatric hypotheses concerning women undergoing plastic surgery, although these hypotheses do not specifically address the association with suicide. Epidemiologic research is urgently needed to evaluate whether this association is an artifact of a higher prevalence of underlying and unreported psychopathology and other

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risk factors for suicide among women receiving breast implants or whether implants have an actual causal role in the risk of suicide. Until such studies are completed, psychiatric consultation should be considered before breast augmentation, especially for patients perceived to be at high risk by the plastic surgeon. [References: 46]

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<15>

Authors

Mechawar N. Saghatelian A. Grailhe R. Scoriels L. Gheusi G. Ghabellac MM. Lledo PM. Changeux JP.

Title

Nicotinic receptors regulate the survival of newborn neurons in the adult olfactory bulb

Source
Proceedings of the National Academy of Sciences of the United States of America. 101(26):9822-9826, 2004 Jun 29.

Abstract

Cholinergic axons and nicotinic receptors are abundant in all layers of the olfactory bulb (OB), the main region of newborn neuron integration in the adult brain. Here, we report that the OB granule cell layer in mice lacking the predominant form of brain high-affinity nicotinic acetylcholine receptors (beta(2)(-/-) mice) displayed nearly 50% more newborn neurons and significantly fewer apoptotic cells than did beta(2)(+/+) mice. Conversely, in vivo chronic nicotine exposure significantly decreased the number of newborn granule cells in beta(2)(+/+) but not beta(2)(-/-) adult mice, confirming that the survival of newborn neurons can be controlled by the activation of beta(2)-containing nicotinic acetylcholine receptors. Unexpectedly, investigating the behavioral consequence of an increased number of granule cells in beta(2)(-/-) mice revealed that these animals have a less robust short-term olfactory memory than their wild-type counterparts. Taken together, these results provide evidence that high-affinity nicotinic receptors are involved in the maturation of adult OB local circuits. They also indicate that an increase in the number of granule cells does not necessarily correlate with better olfactory performance and further highlight the importance of cholinergic afferents for olfactory processing. [References: 28]

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<16>

Authors

Shrader SP. Fermo JD. Dzikowski AL.

Title

Azithromycin and warfarin interaction

Source

Pharmacotherapy. 24(7):945-949, 2004 Jul.

Abstract

A 57-year-old Caucasian woman came to the clinic with symptoms of an upper respiratory tract infection. She was treated with a 5-day course of oral azithromycin 500 mg on day 1, then 250 mg/day for 4 days. During this

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period, the patient decreased her cigarette smoking from 1 pack/day to 1 pack every 3 days. No additional confounding variables were present. Two days after the completion of therapy, her international normalized ratio (INR) was 8.32. Six case reports documented in the literature have suggested an azithromycin-warfarin interaction with a resultant increase in INR. Many confounding variables existed in each of these cases, such as hepatic dysfunction, poor appetite, and concomitant drugs that resulted in an increased anticoagulant response. We report a case that involved only one potential confounding variable. Continued documentation of azithromycin-warfarin interactions is valuable considering no mention of this drug interaction exists in most tertiary references and in the package insert for azithromycin, the demonstration that no drug interaction occurred in a retrospective review of 52 cases, and the widespread use of azithromycin in the community. Clinicians should be mindful when prescribing azithromycin in combination with warfarin, and INR values should be monitored. [References: 13]

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<17>

Authors

Heininger U. Kleemann WJ. Cherry JD.

Title

A controlled study of the relationship between *Bordetella pertussis* infections and sudden unexpected deaths among German infants

Source

Pediatrics. 114(1):E9-E15, 2004 Jul.

Abstract

Objective. This was a prospective, controlled, multicenter study to investigate the relationship between *Bordetella pertussis* infections and sudden unexpected deaths among German infants.

Design. Between 1995 and 1997, all infants who died at 7 to 365 days of age and for whom autopsies were performed in 1 of 8 participating institutes of legal medicine were enrolled. During a standardized autopsy, nasopharyngeal specimens (NPSs) and tracheal specimens were obtained for polymerase chain reaction (PCR) assays to detect *B. pertussis*. The oligonucleotide primers PTP1 and PTP2, which specifically amplify a 191-base pair DNA fragment of the pertussis toxin operon of *B. pertussis*, were used. Two control subjects (matched according to residence, age, gender, and nationality) were enrolled for each case subject, via a network of pediatricians in private practice, and NPSs were obtained from those infants. Parents of case subjects and control subjects were asked to provide specific information on respiratory illnesses of the child, contact with a known case of pertussis, or close contact with a person with a cough illness during the 4 weeks before death or enrollment, as well as the child's pertussis immunization status. The pathologists performing the autopsies were unaware of the PCR results.

Results. Enrolled were 254 infants (66% male) with sudden unexpected deaths and 441 matched control subjects. Autopsies according to protocol were performed for 234 of the case subjects (92%); a diagnosis of sudden infant death syndrome (SIDS) was made for 76%. For the remaining subjects, causes of death were respiratory or other infections (14%), congenital anomalies or organ failures (4%), aspiration (2%), or accidents or traumatic events (4%). PCR results were positive for *B. pertussis* for 12 case subjects (5.1%) (all with SIDS or respiratory infections) and 5.3% of control subjects. Of the 12 case subjects with positive PCR results, 10

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(83%) were male. Questionnaires had been returned by the parents of 5 of the 12 infants. Three had experienced a respiratory illness (all with cough), beginning 7, 14, and 19 days before death. None had a known contact with a case of pertussis. Four of 15 control infants (27%) with positive PCR findings for *B. pertussis* had a cough illness, indicating possible pertussis, and 2 of those 4 developed typical symptoms (whooping). Background information was received from 116 parents (46%) of case subjects and from parents of all control subjects. Upper respiratory tract infections within 4 weeks before death were reported for 53% of case subjects and 38% of control subjects. Also, fewer case subjects (33%) than control subjects (68%) had received age-adequate numbers of pertussis vaccine doses.

Conclusions. The concept of infection as a factor in SIDS is supported by a number of observations, including the seasonal distribution of the occurrence of SIDS; the high incidence of concurrent upper respiratory tract infections among infants dying as a result of SIDS; the peak age at 3 to 4 months; nicotine use in a child's household, which predisposes children to respiratory infections such as otitis media; and the protective role of breastfeeding. A prominent role might be suspected for *B. pertussis* for several reasons. 1) *B. pertussis* infections in infancy are frequently associated with apneic spells, which are occasionally life-threatening and, if leading to death, might be reported as SIDS. 2) Epidemiologic evidence from the United Kingdom, Sweden, and Norway indicates that SIDS is associated with *B. pertussis* infection. 3) In a previously published study, we detected *B. pertussis* DNA in the nasopharynx of 9 of 51 consecutive infants (18%) with sudden unexpected deaths. This is the first prospective, controlled study to investigate the possible etiologic role of *B. pertussis* in SIDS. Clinically unrecognized *B. pertussis* infections were relatively frequent (5.3%) among control infants during the course of our study. The rate of infection was similar or perhaps greater for control subjects, compared with case subjects (1.7%), when only NPS results were compared. This may seem surprising but is supported by other studies, in which asymptomatic infections or mild respiratory illnesses were observed among infants exposed to *B. pertussis*. Careful autopsies, including histologic evaluations of organ specimens and use of PCR to detect *B. pertussis* in NPSs and tracheal specimens, represented a strength of this study. Our general findings were as expected. The majority of cases were classified as SIDS. The second largest group included infants for whom respiratory infections were found. The findings of various other diagnoses, which in several instances would have been undiscovered otherwise, emphasize the need for autopsies after unexpected infant deaths. What is the significance of the identified *B. pertussis* infections in 12 cases? Several pieces of evidence support the plausibility of a cause-and-effect relationship. Eight of the 12 case subjects died before 6 months of age, the typical age for death attributable to pertussis. In autopsies, 9 of the subjects were found to have signs of respiratory infections; for 2 infants, the autopsies suggested that death was attributable to a respiratory infection. One additional infant (data not shown) had brain edema (which could have been attributable to hypoxemia during pertussis). Lower rates of completed primary series or age-adequate numbers of pertussis vaccine doses among case subjects than among control subjects may indicate that immunization against pertussis protects children from death attributable to unrecognized *B. pertussis* infection. Moreover, a recent study indicated that immunization with diphtheria-tetanus-pertussis vaccine induces antibodies that cross-react with pyrogenic staphylococcal toxins, which have been implicated in several cases of SIDS. Other microorganisms may be involved in the sudden death of infants, as suggested in this study by the higher rate of a history of concurrent upper respiratory tract infections among case subjects, compared with control subjects. Similarly, in a Scandinavian study, 48% of 244 SIDS case subjects, compared with 31% of 869 control subjects, exhibited symptoms of upper airway infection during

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the last week before death or interview, respectively. Because SIDS is a diagnosis of exclusion, ev

This should include the search for pathogenic microorganisms in the respiratory tract with the use of PCR and other sensitive tests. In conclusion, B pertussis infection was found for 12 of 234 infants (5.1%) with unexpected deaths, and the infections might have contributed to the deaths. [References: 41]
Publication Type
Article

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<http://gateway.ovid.com/ovidweb.cgi?T=JS&MODE=ovid&PAGE=fulltext&NEWS=n&D=ccse&AUTOALERT=108381400%7c17>

<18>

Authors

Whitaker RC.

Title

Predicting preschooler obesity at birth: The role of maternal obesity in early pregnancy

Source

Pediatrics. 114(1):E29-E36, 2004 Jul.

Abstract

Objective. Knowing risk factors at birth for the development of childhood obesity could help to identify children who are in need of early obesity prevention efforts. The objective of this study was to determine whether children whose mothers were obese in early pregnancy were more likely to be obese at 2 to 4 years of age.

Methods. A retrospective cohort study was conducted of 8494 low-income children who were enrolled in the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) in Ohio and were followed from the first trimester of gestation until 24 to 59 months of age. Measured height and weight data from WIC were linked to birth certificate records for children who were born in the years 1992 - 1996. Obesity among 2- to 4-year-olds was defined as a body mass index (BMI) greater than or equal to 95th percentile for age and gender. Mothers were classified as obese (BMI greater than or equal to 30 kg/m(2)) or nonobese (BMI < 30 kg/m(2)) on the basis of BMI measured in the first trimester of the child's gestation.

Results. The prevalence of childhood obesity was 9.5%, 12.5%, and 14.8% at 2, 3, and 4 years of age, respectively, and 30.3% of the children had obese mothers. By 4 years of age, 24.1% of children were obese if their mothers had been obese in the first trimester of pregnancy compared with 9.0% of children whose mothers had been of normal weight (BMI < 25 kg/m(2)). After controlling for the birth weight, birth year, and gender of the children plus the mothers' age, race/ethnicity, education level, marital status, parity, weight gain, and smoking during pregnancy, the relative risk of childhood obesity associated with maternal obesity in the first trimester of pregnancy was 2.0 (95% confidence interval [CI]: 1.7 - 2.3) at 2 years of age, 2.3 (95% CI: 2.0 - 2.6) at 3 years of age, and 2.3 (95% CI: 2.0 - 2.6) at 4 years of age.

Conclusion. Among low-income children, maternal obesity in early pregnancy more than doubles the risk of obesity at 2 to 4 years of age. In developing strategies to prevent obesity in preschoolers, special attention should be given to newborns with obese mothers. [References: 52]

Publication Type
Article

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<19>

Authors

Tremblay RE, Nagin DS, Seguin JR, Zoccolillo M, Zelazo PD, Boivin M, Perusse D, Japel C.

Title

Physical aggression during early childhood: Trajectories and predictors

Source

Pediatrics. 114(1):E43-E50, 2004 Jul.

Abstract

Objectives. Physical aggression in children is a major public health problem. Not only is childhood physical aggression a precursor of the physical and mental health problems that will be visited on victims, but also aggressive children themselves are at higher risk of alcohol and drug abuse, accidents, violent crimes, depression, suicide attempts, spouse abuse, and neglectful and abusive parenting. Furthermore, violence commonly results in serious injuries to the perpetrators themselves. Although it is unusual for young children to harm seriously the targets of their physical aggression, studies of physical aggression during infancy indicate that by 17 months of age, the large majority of children are physically aggressive toward siblings, peers, and adults. This study aimed, first, to identify the trajectories of physical aggression during early childhood and, second, to identify antecedents of high levels of physical aggression early in life. Such antecedents could help to understand better the developmental origins of violence later in life and to identify targets for preventive interventions.

Methods. A random population sample of 572 families with a 5-month-old newborn was recruited. Assessments of physical aggression frequency were obtained from mothers at 17, 30, and 42 months after birth. Using a semiparametric, mixture model, distinct clusters of physical aggression trajectories were identified. Multivariate logit regression analysis was then used to identify which family and child characteristics, before 5 months of age, predict individuals on a high-level physical aggression trajectory from 17 to 42 months after birth. Results. Three trajectories of physical aggression were identified. The first was composed of children who displayed little or no physical aggression. These individuals were estimated to account for similar to 28% of the sample. The largest group, estimated at similar to 58% of the sample, followed a rising trajectory of modest aggression. Finally, a group, estimated to comprise similar to 14% of the sample, followed a rising trajectory of high physical aggression. Best predictors before or at birth of the high physical aggression trajectory group, controlling for the levels of the other risk factors, were having young siblings (odds ratio [OR]: 4.00; confidence interval [CI]: 2.2-7.4), mothers with high levels of antisocial behavior before the end of high school (OR: 3.1; CI: 1.1 - 8.6), mothers who started having children early (OR: 3.1; CI: 1.4 - 6.8), families with low income (OR: 2.6; CI: 1.3 - 5.2), and mothers who smoked during pregnancy (OR: 2.2; CI: 1.1 - 4.1). Best predictors at 5 months of age were mothers' coercive parenting behavior (OR: 2.3; CI: 1.1 - 4.7) and family dysfunction (OR: 2.2; CI: 1.2 - 4.1). The OR for a high-aggression trajectory was 10.9 for children whose mother reported both high levels of antisocial behavior and early childbearing.

Conclusions. Most children have initiated the use of physical aggression during infancy, and most will learn to use alternatives in the following years before they enter primary school. Humans seem to learn to regulate the use of physical aggression during the preschool years. Those who do not, seem to be at highest risk of serious violent behavior during

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adolescence and adulthood. Results from the present study indicate that children who are at highest risk of not learning to regulate physical aggression in early childhood have mothers with a history of antisocial behavior during their school years, mothers who start childbearing early and who smoke during pregnancy, and parents who have low income and have serious problems living together. All of these variables are relatively easy to measure during pregnancy. Preventive interventions should target families with high-risk profiles on these variables. Experiments with such programs have shown long-term impacts on child abuse and child antisocial behavior. However, these impacts were not observed in families with physical violence. The problem may be that the prevention programs that were provided did not specifically target the parents' control over their physical aggression and their skills in teaching their infant not to be physically aggressive. Most intervention programs to prevent youth physical aggression have targeted school-age children. If children normally learn not to be physically aggressive during the preschool years, then one would expect that interventions that target infants who are at high risk of chronic physical aggression would have more of an impact than interventions 5 to 10 years later, when physical aggression has become a way of life. [References: 67]

Publication Type
Article

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<20>

Authors

Milner JD. Stein DM. McCarter R. Moon RY.

Title

Early infant multivitamin supplementation is associated with increased risk for food allergy and asthma

Source

Pediatrics. 114(1):27-32, 2004 Jul.

Abstract

Objective. Dietary vitamins have potent immunomodulating effects in vitro. Individual vitamins have been shown to skew T cells toward either T-helper 1 or T-helper 2 phenotypic classes, suggesting that they may participate in inflammatory or allergic disease. With the exception of antioxidant protection, there has been little study on the effect of early vitamin supplementation on the subsequent risk for asthma and allergic disease. The objective of this study was to determine whether early vitamin supplementation during infancy affects the risk for asthma and allergic disease during early childhood.

Methods. Cohort data were analyzed from the National Center for Health Statistics 1988 National Maternal-Infant Health Survey, which followed pregnant women and their newborns, and the 1991 Longitudinal Follow-up of the same patients, which measured health and disease outcomes. Patients were stratified by race and breastfeeding status. Factors that are known to be associated with alteration of risk for asthma or food allergies were identified using univariate logistic regression. Those factors were then analyzed in multivariate logistic regression models. Early vitamin supplementation was defined as vitamin use within the first 6 months.

Results. There were > 8000 total patients in the study. The overall incidence of asthma was 10.5% and of food allergy was 4.9%. In univariate analysis, male gender, smoker in the household, child care, prematurity (< 37 weeks), being black, no history of breastfeeding, lower income, and lower education were associated with higher risk for asthma. Child care, higher levels of education, income, and history of breastfeeding were

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associated with a higher risk for food allergies. In multivariate logistic analyses, a history of vitamin use within the first 6 months of life was associated with a higher risk for asthma in black infants (odds ratio [OR]: 1.27; 95% confidence interval [CI]: 1.04 - 1.56). Early vitamin use was also associated with a higher risk for food allergies in the exclusively formula-fed population (OR: 1.63; 95% CI: 1.21 - 2.20). Vitamin use at 3 years of age was associated with increased risk for food allergies but not asthma in both breastfed (OR: 1.62; 95% CI: 1.19 - 2.21) and exclusively formula-fed infants (OR: 1.39; 95% CI: 1.03 - 1.88).

Conclusions. Early vitamin supplementation is associated with increased risk for asthma in black children and food allergies in exclusively formula-fed children. Additional study is warranted to examine which components most strongly contribute to this risk. [References: 29]

Publication Type
Article

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<21>

Authors

Sargent JD. Beach ML. Dalton MA. Ernstoff LT. Gibson JJ. Tickle JJ. Heatherton TF.

Title

Effect of parental R-rated movie restriction on adolescent smoking initiation: A prospective study

Source

Pediatrics. 114(1):149-156, 2004 Jul.

Abstract

Objective. To determine if young adolescents who report that their parents restrict viewing R-rated movies have a lower risk of trying smoking in the future.

Design. Prospective observational study. Students from 15 schools in New Hampshire and Vermont, randomly selected from all middle schools with >150 students, were surveyed in 1999. Baseline never-smokers were surveyed again by telephone 13 to 26 months later to determine smoking status.

Outcome Measure. Trying smoking during the follow-up period.

Results. The majority of the 2596 students were white, with ages ranging from 10 to 14 years. Nineteen percent reported that their parents never allowed them to view R-rated movies, 29% were allowed once in a while, and 52% were allowed sometimes or all the time. Ten percent of students tried smoking during the follow-up period. Smoking-initiation rates increased as parental restriction of R-rated movies decreased (2.9% for adolescents reporting that their parents never allowed them to view R-rated movies, 7.0% for those allowed to view them once in a while, and 14.3% for those allowed to view them sometimes or all the time). There was a strong and statistically significant effect of parental R-rated movie restriction on adolescent smoking even after controlling for sociodemographics, social influences (friend smoking, receptivity to tobacco promotions), parenting style (maternal support and control, parental disapproval of smoking), and characteristics of the adolescent (school performance, sensation seeking, rebelliousness, self-esteem). Compared with adolescents whose parents never allowed them to view R-rated movies, the adjusted relative risk for trying smoking was 1.8 (95% confidence interval [CI]: 1.1, 3.1) for those allowed to watch them once in a while and 2.8 (95% CI: 1.6, 4.7) for those allowed to watch them sometimes or all the time. The effect was especially

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strong among adolescents not exposed to family (parent or sibling) smoking, among whom the adjusted relative risk for smoking was 4.3 (95% CI: 1.4, 13) for those allowed to view R-rated movies once in a while and 10.0 (95% CI: 3.6, 31) for those allowed to view them sometimes or all the time.

Conclusions. Parental restriction from watching R-rated movies strongly predicts a lower risk of trying smoking in the future. The effect is largest among adolescents not exposed to family smoking. By exerting control over media choices and by not smoking themselves, parents may be able to prevent or delay smoking in their children. [References: 28]

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Authors

Matturri L. Ottaviani G. Corti G. Lavezzi AM.

Title

Pathogenesis of early atherosclerotic lesions in infants

Source

Pathology, Research & Practice. 200(5):403-410, 2004.

Abstract

High serologic lipid levels, infections, and genetic susceptibility have been proposed as possible etiologic factors of initial atherosclerotic lesions of the coronary arteries in infancy. At a recent WHO annual meeting, it was stated that breast milk substitutes cause irreparable damage in infants. This prompted us to verify whether formula feeding and parental cigarette smoking might play a role in the pathogenesis of early atherosclerotic alterations in infancy. The major epicardial coronary arteries from 36 infants dying suddenly and unexpectedly (sudden infant death syndrome) were embedded in paraffin and serially cut for histologic examination. In 67% of the cases, multifocal coronary early atherosclerotic lesions of varying entities were detected. The alterations ranged from focal plaques with mild myointimal thickening to juvenile soft plaques reducing the arterial lumen. A significant correlation was observed between the early atherosclerotic lesions and the risk factors considered. In particular, we noted different morphologic patterns related to formula feeding and cigarette smoking. Baby formula feeding and parental cigarette smoking might have an atherogenic effect on the coronary walls as from the first months of life. The lesions appear to be larger and more diffuse when both these atherogenic factors are present. (C) 2004 Elsevier GmbH. All rights reserved. [References: 30]

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<23>

Authors

Gonnelli S. Montagnani A. Gennari L. Martini S. Merlotti D. Cepollaro C. Perrone S. Buonocore G. Nuti R.

Title

Feasibility of quantitative ultrasound measurements on the humerus of newborn infants for the assessment of the skeletal status

Source

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Osteoporosis International. 15(7):541-546, 2004 Jul.

Abstract

Quantitative ultrasound (QUS), although widely used in adults has, so far, been scarcely employed in newborn infants and children. This study aimed to evaluate the feasibility of the use of QUS in newborn children and the factors influencing QUS parameters. In 140 consecutive healthy full-term newborn babies (76 male and 64 female; gestational age: 39.5/-1.5 weeks) QUS parameters were assessed within 3 days of the child's birth at the distal diaphysis of the humerus by use of Bone Profiler, after an appropriate modification of caliper and software. In all subjects we evaluated the amplitude-dependent speed of sound (AD-SoS) (meters per second), the characterizing graphic trace parameters [signal dynamic (SDy), fast wave amplitude (FWA) and bone transmission time (BTT)], SoS (meters per second), that is, the speed of sound calculated on the first peak, and hBTT, that is, the interval time between the first peak of the ultrasound and when this reaches the speed of 1,570 m/s, which is the velocity of ultrasound in the soft tissue. This latter parameter allows one to measure bone tissue independently of soft tissue. QUS measurements were also performed at the phalanges on all mothers (age range 24-38 years), who also completed a self-report questionnaire on their obstetric history, smoking and dietary habits and family history of osteoporosis. In 73 mothers and their children QUS was repeated after 12 months. All QUS parameters were slightly higher in male than in female newborn infants but the difference was not significant. BTT and hBTT of neonates showed a significant relationship with birth weight ($r=0.20$; $P<0.05$ and $r=0.37$; $P<0.01$, respectively) and with cranial circumference ($r=0.22$; $P<0.05$ and $r=0.36$; $P<0.01$, respectively). In newborn infants none of the QUS parameters was significantly influenced by maternal QUS or by maternal smoking and calcium intake. In a model of multiple regression analysis the cranial circumference was the only parameter entered into the model, explaining approximately 15% of hBTT value. At month 12 AD-SoS and SoS were slightly lower than at birth (-11% and -0.1%, respectively), whereas both BTT and hBTT showed a significant ($P<0.001$) increase. The present study demonstrated the feasibility of the use of QUS, as assessed by a new measurement approach at the humerus, in the evaluation of skeletal status in neonates. BTT and, above all, hBTT, appears to be the best parameter for both evaluation of skeletal status at birth and monitoring of bone growth in the first year of life. [References: 25]

Publication Type
Article

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<24>

Authors

Tomany SC. Wang HJ. van Leeuwen R. Klein R. Mitchell P. Vingerling JR. Klein BEK. Smith W. de Jong PTVM.

Title

Risk factors for incident age-related macular degeneration - Pooled findings from 3 continents

Source

Ophthalmology. 111(7):1280-1287, 2004 Jul.

Abstract

Objective: To examine risk factors for incident age-related macular degeneration (AMD) after combining data from 3 population-based cohort studies.

Design: Population-based cohort study.

Population: A population of 9523 adults (age range, 43-95 years at baseline)

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baseline) living in Australia, The Netherlands, and the United States who participated in a baseline examination and a follow-up examination on average 5 or 6 years later.

Methods: Similar procedures were used at all study sites. Examinations included a standardized questionnaire, pupillary dilation, and stereoscopic color fundus photography. Fundus photographs were graded for lesions associated with AMD using the Wisconsin and International Age-Related Maculopathy Grading Systems. Senior investigators from each site adjudicated all photos graded as late AMD.

Main Outcomes Measure: Incidence of late AMD.

Results: Among studies, distributions for most risk factors differed, and overall incidence rates were similar. In the Beaver Dam Eye Study, total serum cholesterol was inversely associated with incident neovascular AMD. In the Blue Mountains Eye Study, current smoking (defined as smoking at the time of the baseline examination) was associated with an increased risk of incident geographic atrophy and late AMD; increased total serum cholesterol, having diabetes, and older age at menopause were positively associated with incident geographic atrophy; and an increase in high-density lipoprotein serum cholesterol was inversely related to incident geographic atrophy. In the Rotterdam Study, current smoking was associated with an increased risk of incident geographic atrophy, neovascular AMD, and late AMD; past smoking was associated with an increased risk of incident neovascular AMD and late AMD; and an increased number of years between menarche and menopause was directly related to incident geographic atrophy. After pooling data, the only statistically significant relationships found were between smoking and total serum cholesterol and incident AMD. Current smoking was associated with an increased incidence of geographic atrophy and late AMD (odds ratios [ORs] relative to nonsmokers: 2.83 and 2.35, respectively; ORs relative to past smokers: 2.80 and 1.82, respectively), and total serum cholesterol was associated directly with incident geographic atrophy (OR: 1.08 per 10 mg/dl) and inversely with incident neovascular AMD (OR: 0.94 per 10 mg/dl).

Conclusions: Pooled data support a growing body of evidence indicating that smoking is related to an increased risk of incident AMD. Current smokers were at higher risk of incident AMD than both past smokers and those who never smoked. The relationships found in this study between total serum cholesterol and incident geographic atrophy and neovascular AMD are not readily explained. (C) 2004 by the American Academy of Ophthalmology. [References: 37]

Publication Type
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Authors

Aharony O. Givon A. Kutasov D.

Title

LSZ in LST

Source

Nuclear Physics B. 691(1-2):3-78, 2004 Jul 19.

Abstract

We discuss the analytic structure of off-shell correlation functions in Little String Theories (LSTs) using their description as asymptotically linear dilaton backgrounds of string theory. We focus on specific points

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in the LST moduli space where this description involves the spacetime $R-d-1, R-1 \times SL(2)/U(1)$ times a compact CFT, though we expect our qualitative results to be much more general. We show that n -point functions of vertex operators $O(pmu)$ have single poles as a function of the d -dimensional momentum pmu , which correspond to normalizable states localized near the tip of the $SL(2)/U(1)$ cigar. Additional poles arise due to the non-trivial dynamics in the bulk of the cigar, and these can lead to a type of UV/IR mixing. Our results explain some previously puzzling features of the low energy behavior of the Green functions. As another application, we compute the precise combinations of single-trace and multi-trace operators in the low-energy gauge theory which map to single string vertex operators in the $N = (1, 1)$ supersymmetric $d = 6$ LST. We also discuss the implications of our results for two-dimensional string theories and for the (non)existence of a Hagedorn phase transition in LSTs. (C) 2004 Published by Elsevier B.V. [References: 74]

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Authors

Goldschmidt L. Richardson GA. Cornelius MD. Day NL.

Title

Prenatal marijuana and alcohol exposure and academic achievement at age 10

Source

Neurotoxicology & Teratology. 26(4):521-532, 2004 Jul-Aug.

Abstract

The effects of prenatal marijuana and alcohol exposure on school achievement at 10 years of age were examined. Women were interviewed about their substance use at the end of each trimester of pregnancy, at 8 and 18 months, and at 3, 6, 10, 14, and 16 years. The women were of lower socioeconomic status, high-school-educated, and light-to-moderate users of marijuana and alcohol. The sample was equally divided between Caucasian and African-American women. At the 10-year follow-up, the effects of prenatal exposure to marijuana or alcohol on the academic performance of 606 children were assessed. Exposure to one or more marijuana joints per day during the first trimester predicted deficits in wide range Achievement Test-Revised (WRAT-R) reading and spelling scores and a lower rating on the teachers' evaluations of the children's performance. This relation was mediated by the effects of first-trimester marijuana exposure on the children's depression and anxiety symptoms. Second-trimester marijuana use was significantly associated with reading comprehension and underachievement. Exposure to alcohol during the first and second trimesters of pregnancy predicted poorer teachers' ratings of overall school performance. Second-trimester binge drinking predicted lower reading scores. There was no interaction between prenatal marijuana and alcohol exposure. Each was an independent predictor of academic performance. (C) 2004 Elsevier Inc. All rights reserved. [References: 45]

Publication Type
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Authors

Smith AM. Fried PA. Hogan MJ. Cameron I.
Page 20

Title
Effects of prenatal marijuana on response inhibition: an fMRI study of young adults

Source
Neurotoxicology & Teratology. 26(4):533-542, 2004 Jul-Aug.

Abstract

The neurophysiological effects of prenatal marijuana exposure on response inhibition were assessed in 18- to 22-year-olds. Thirty-one participants from the Ottawa Prenatal Prospective Study (OPPS) performed a blocked design Go/No-Go task while neural activity was imaged with functional magnetic resonance imaging (fMRI). The OPPS is a longitudinal study that provides a unique body of information collected from each participant over 20 years, including prenatal drug history, detailed cognitive/behavioral performance from infancy to young adulthood, and current and past drug usage. The fMRI results showed that with increased prenatal marijuana exposure, there was a significant increase in neural activity in bilateral prefrontal cortex and right premotor cortex during response inhibition. There was also an attenuation of activity in left cerebellum with increased prenatal exposure to marijuana when challenging the response inhibition neural circuitry. Prenatally exposed offspring had significantly more commission errors than nonexposed participants, but all participants were able to perform the task with more than 85% accuracy. These findings were observed when controlling for present marijuana use and prenatal exposure to nicotine, alcohol and caffeine, and suggest that prenatal marijuana exposure is related to changes in neural activity during response inhibition that last into young adulthood. (C) 2004 Elsevier Inc. All rights reserved. [References: 77]

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Authors

Mandavilli A.

Title

Nicotine fix

Source

Nature Medicine. 10(7):660-661, 2004 Jul.

Publication Type

News Item

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<29>

Authors

Swiderska-Kolacz G. Parka B. Kolataj A. Klusek J.

Title

Influence of morphine and scopolamine on glutathione contents and activity of glutathione enzymes in mouse organs [German]

Source

Medycyna Weterynaryjna. 60(7):739-742, 2004 Jul.

Abstract

The aim of the study was to determine the influence of morphine and scopolamine on the glutathione level and activity of glutathione enzymes in the liver, kidney and muscles.

The study was carried out on 30 male and 30 female 8-week-old mice weighing 20-22g. All individuals were placed in standard cages, had constant access to water and standard food (16% of protein in the diet). The experimental groups received morphine (20 mg/kg b.w.) and scopolamine (0.5 mg/b.w.). The level of reduced glutathione, the reactivity of glutathione, the activity of glutathione transferase, glutathione peroxidase and glutathione reductase were determined in the liver, kidney and muscles.

The alkaloids decreased the GSH level and the activity of glutathione peroxidase. The activity of glutathione transferase increased while the activity of the glutathione reductase increased insignificantly. Sex had no influence on the animals' reactivity. [References: 37]

Publication Type
Article

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<30>

Authors

Gray N.

Title

The future of the cigarette and its market

Source

Lancet. 364(9430):231-232, 2004 Jul 17.

Publication Type
Editorial Material

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<http://gateway.ovid.com/ovidweb.cgi?T=JS&MODE=ovid&PAGE=fulltext&NEWS=n&D=ccse&AUTOA LERT=108381400%7c30>

<31>

Authors

Hancox RJ. Milne BJ. Poulton R.

Title

Association between child and adolescent television viewing and adult health: a longitudinal birth cohort study

Source

Lancet. 364(9430):257-262, 2004 Jul 17.

Abstract

Background Watching television in childhood and adolescence has been linked to adverse health indicators including obesity, poor fitness, smoking, and raised cholesterol. However, there have been no longitudinal studies of childhood viewing and adult health. We explored these associations in a birth cohort followed up to age 26 years.

Methods We assessed approximately 1000 unselected individuals born in Dunedin, New Zealand, in 1972-73 at regular intervals up to age 26 years. We used regression analysis to investigate the associations between earlier television viewing and body-mass index, cardiorespiratory fitness (maximum aerobic power assessed by a submaximal cycling test), serum cholesterol, smoking status, and blood pressure at age 26 years.

Findings Average weeknight viewing between ages 5 and 15 years was associated with higher body-mass indices ($p=0.0013$), lower cardiorespiratory fitness ($p=0.0003$), increased cigarette smoking ($p<0.0001$), and raised serum cholesterol ($p=0.0037$). Childhood and adolescent viewing had no significant association with blood pressure.

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These associations persisted after adjustment for potential confounding factors such as childhood socioeconomic status, body-mass index at age 5 years, parental body-mass index, parental smoking, and physical activity at age 15 years. In 26-year-olds, population-attributable fractions indicate that 17% of overweight, 15% of raised serum cholesterol, 17% of smoking, and 15% of poor fitness can be attributed to watching television for more than 2 h a day during childhood and adolescence.

Interpretation Television viewing in childhood and adolescence is associated with overweight, poor fitness, smoking, and raised cholesterol in adulthood. Excessive viewing might have long-lasting adverse effects on health. [References: 21]

Publication Type
Article

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<http://gateway.ovid.com/ovidweb.cgi?T=JS&MODE=ovid&PAGE=fulltext&NEWS=n&D=ccse&AUTOA LERT=108381400%7c31>

<32>

Authors

Ottenbacher KJ. Ostir GV. Peek MK. Markides KS.

Title

Diabetes mellitus as a risk factor for stroke incidence and mortality in Mexican American older adults

Source

Journals of Gerontology Series A-Biological Sciences & Medical Sciences. 59(6):640-645, 2004 Jun.

Abstract

Background. Little is known regarding diabetes mellitus as a risk factor for stroke incidence and death in older Mexican Americans. The authors studied diabetes and other potential risk factors for stroke in a sample of community-dwelling older Mexican Americans.

Methods. A prospective cohort design was used that involved the Hispanic Established Population for the Epidemiologic Study of the Elderly, a longitudinal study using a weighted probability sample of Mexican Americans (aged older than 65 years) living in the southwestern United States. 3050 older Mexican American persons were originally interviewed and tested at baseline and then followed with reassessment at 2, 5, and 7 years. The incidence of stroke and stroke death were studied for the participants during a 7-year follow-up period.

Results. 690 participants were identified at baseline with diabetes. 238 participants experienced a first-time stroke during the follow-up period. 66 died as a result of a stroke. Cox proportional hazard regression analysis revealed an increased hazard ratio (HR) for stroke in persons with diabetes (HR, 1.80; 95% confidence interval [CI], 1.32 to 2.44; $p < .0002$) when adjusted for age, sex, body mass index, smoking, systolic blood pressure, previous heart attack, and lower extremity function. The stroke mortality rate was also higher (HR, 2.02; 95% CI, 1.04 to 3.93) for persons with diabetes when adjusted for covariates.

Conclusion. Diabetes was associated with an increased incidence of stroke and death in older Mexican Americans, particularly those taking insulin.

[References: 39]

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Article

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<33>

Authors

Fichtlscherer S. Breuer S. Heeschen C. Dimmeler S. Zeiher AM.

Title

Interleukin-10 serum levels and systemic endothelial vasoreactivity in patients with coronary artery disease

Source

Journal of the American College of Cardiology. 44(1):44-49, 2004 Jul 7.

Abstract

OBJECTIVES Because the endothelium is a major target for inflammatory cytokines, we investigated whether elevated interleukin (IL)-10 serum levels are associated with improved endothelial vasoreactivity in patients with coronary artery disease (CAD).

BACKGROUND Chronic inflammation plays a pivotal role in the progression of atherosclerosis. Interleukin-10 is an anti-inflammatory cytokine that exerts important protective effects on atherosclerotic lesion development in experimental animals.

METHODS Vasoreactivity was assessed in 65 male patients with documented CAD by measuring endothelium-dependent (acetylcholine [ACh] 10 to 50 $\mu\text{g}/\text{min}$) and endothelium-independent (sodium nitroprusside [SNP] 2 to 8 $\mu\text{g}/\text{min}$) forearm blood flow (FBF) responses using venous occlusion plethysmography.

RESULTS Serum levels of IL-10 were significantly correlated with ACh-induced FBF responses ($r = 0.31$, $p < 0.02$), but not with SNP responses. Importantly, if IL-10 serum levels were increased in patients with elevated C-reactive protein (CRP) levels, no impairment of ACh-stimulated FBF response was observed. On multivariate analysis, including low-density lipoprotein cholesterol, smoking, hypertension, diabetes, clinical status of the patients, and statin and/or angiotensin-converting enzyme inhibitor treatment, only IL-10 ($p < 0.02$) and CRP serum levels ($p < 0.02$) were significant independent predictors of ACh-induced FBF responses.

CONCLUSIONS Thus, increased IL-10 serum levels are associated with improved systemic endothelial vasoreactivity in patients with elevated CRP serum levels, demonstrating that the balance between pro- and anti-inflammatory mediators is a major determinant of endothelial function in patients with CAD. (C) 2004 by the American College of Cardiology Foundation. [References: 31]

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<34>

Authors

Gadek-Michalska A. Bugajski J.

Title

Role of nitric oxide in the nicotine-induced pituitary-adrenocortical response

Source

Journal of Physiology & Pharmacology. 55(2):443-455, 2004 Jun.

Abstract

Nitric oxide (NO) is a major signaling molecule and biological mediator of the hypothalamic-pituitary-adrenal (HPA) axis. We investigated the role of

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NO formed by endothelial (e), neuronal (n) and inducible (i) nitric oxide synthase (NOS) in the stimulatory effect of nicotine on the HPA axis in rats under basal conditions. Also possible interaction of NOS systems with endogenous prostaglandins (PG) in that stimulation was assessed. NOS and cyclooxygenase inhibitors were administered i.p. 15 min prior to nicotine (2, 5 mg/kg i.p.). Plasma ACTH and serum corticosterone levels were measured 1 h after nicotine injection. NOS blockers given alone did not markedly affect the resting ACTH and corticosterone levels. L-NAME (2-10 mg/kg), a broad spectrum NOS inhibitor considerably and dose dependently enhanced the nicotine-induced ACTH and corticosterone secretion. L-NNA (2 mg/kg) and 7-nitroindazole (7-NI 20 mg/kg), neuronal NOS inhibitors in vivo also significantly augmented the nicotine-induced ACTH and corticosterone levels. L-arginine greatly impaired the nicotine-induced hormone responses and reversed the L-NNA elicited enhancement of the nicotine-evoked ACTH and corticosterone response. In contrast to the constitutive eNOS and nNOS antagonists, an inducible NOS antagonist guanethidine (50-100 mg/kg i.p.) did not substantially affect the nicotine-elicited pituitary-adrenocortical responses. Indomethacin (2 mg/kg i.p.), a nonselective cyclooxygenase blocker abolished the L-NAME and L-NNA-induced enhancement of the nicotine-evoked ACTH and corticosterone response. These results indicate that NO is an inhibitory mediator in the HPA axis activity. Inhibition of its generation by eNOS and nNOS significantly enhances the nicotine-induced HPA response. Under basal conditions iNOS is not involved in the nicotine-induced ACTH and corticosterone secretion. Prostaglandins play an obligatory role in the response of HPA axis to systemic nicotine administration. [References: 25]

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Authors

Beamer BR. Topmiller JL. Crouch KG.

Title

Development of evaluation procedures for local exhaust ventilation for United States postal service mail-processing equipment

Source

Journal of Occupational & Environmental Hygiene. 1(7):423-429, 2004 Jul.

Abstract

Researchers from the National Institute for Occupational Safety and Health (NIOSH) have conducted several evaluations of local exhaust ventilation (LEV) systems for the United States Postal Service (USPS) since autumn 2001 when (a) terrorist(s) employed the mail system for acts of bioterrorism. As a part of the USPS 2002 Emergency Preparedness Plan, the development and installation of LEV onto USPS mail-processing equipment can reduce future exposures to operators from potentially hazardous contaminants, such as anthrax, which might be emitted during the processing of mail. This article describes how NIOSH field testing led to the development of recommended testing procedures for evaluations of LEV capture efficiency for mail-processing equipment, including tracer gas measurements, smoke release observations, air velocity measurements, and decay-rate testing under access hoods. [References: 5]

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<36>

Authors

Smith MJ. Le Roux PD. Elliott JP. Winn HR.

Title

Blood transfusion and increased risk for vasospasm and poor outcome after subarachnoid hemorrhage

Source

Journal of Neurosurgery. 101(1):1-7, 2004 Jul.

Abstract

Object. Nitric oxide (NO) metabolism may influence vasospasm after subarachnoid hemorrhage (SAH). It has been demonstrated in recent studies that erythrocytes carry NO for release in vessels, whereas transfused erythrocytes may lack stored NO. Several converging lines of evidence also indicate that blood transfusion may exacerbate poor outcomes in some critically ill patients. In this study the authors hypothesized that patients with SAH who received red blood cell (RBC) transfusions were at greater risk for vasospasm and poor outcome.

Methods. The authors retrospectively reviewed a prospective observational database, including hospital records, computerized tomography (CT) scans, and pre- and postoperative four-vessel angiograms, in which the management methods used in 441 patients undergoing surgery for ruptured cerebral aneurysms were described. Two hundred seventy patients (61.2%) received an RBC transfusion during their hospital stay. After adjustment for Hunt and Hess grade, SAH grade on CT scans, delay between rupture and surgery, smoking status, and intraoperative aneurysm rupture, a worse outcome was more likely in patients who received intraoperative blood (odds ratio [OR] 2.44, confidence interval [CI] 1.32-4.52; 120 patients). Intraoperative RBC transfusion did not influence subsequent angiographically confirmed vasospasm (OR 0.92, CI 0.6-1.4). Worse outcome was observed in patients who received blood postoperatively (OR 1.81, CI 1.21-2.7), but not after adjustments were made for confounding variables (OR 1.48, CI 0.83-2.63). Angiographic vasospasm was observed in 217 patients and, after adjusting for confounding variables, was more frequent among patients who received postoperative RBC transfusion (OR 1.68, CI 1.02-2.75). Among patients in whom angiographically confirmed vasospasm developed there was a tendency to have received more blood than in those with no vasospasm; however, a clear dose-dependent response was not observed.

Conclusions. Development of angiographically confirmed vasospasm after SAH is associated with postoperative RBC transfusion and worse outcome is associated with intraoperative RBC transfusion. Before blood is transfused, patients with SAH should be carefully assessed to determine if they are symptomatic because of anemia. [References: 44]

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<37>

Authors

Frankel JS.

Title

Inheritance of trunk banding in the tetra (*Gymnocorymbus ternetzi* characidae)

Source

Journal of Heredity. 95(3):262-264, 2004 May.

Abstract

The tetra (*Gymnocorymbus ternetzi*) exhibits two phenotypes associated with

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trunk banding. Fish possess either a smoky-gray coloration with two prominent black vertical bands located directly behind the operculum (black tetra) or a lighter coloration and lack these bands (white skirt tetra). Segregation patterns observed from the progenies of 11 different crosses suggest that the inheritance of these phenotypes is controlled by two autosomal loci acting in a complementary fashion, with dominance at both loci required for the expression of the darker, banded phenotype.

[References: 11]
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<38>

Authors

He LY. Hu M. Wang L. Huang XF. Zhang YH.

Title

Characterization of fine organic particulate matter from Chinese cooking

Source

Journal of Environmental Sciences (China). 16(4):570-575, 2004.

Abstract

PM_{2.5} samples were collected by a three-stage cascade impactor at two kinds of Chinese restaurants to characterize fine organic particulate matter from Chinese cooking sources. Major individual organic compounds have been quantified by GC/MS, including series of alkanes, n-alkanoic acids, n-alkanals, alkan-2-ones and PAHs. Alkanes and ketones make up a significant fraction of particle-phase organic compounds, ranging from C-11 to C-26 and C-9 to C-19 respectively. In addition, other organic compound classes have been identified, such as alkanols, esters, furans, lactones, amides, and nitriles. The mass concentrations of fine particles, alkanes, n-alkanoic acids and PAHs in air emitted from the Uigur style cooking are hundreds times higher than ambient PM_{2.5} in Beijing.

[References: 15]
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<39>

Authors

Pellegrini MP. Newby DE. Johnston NR. Maxwell S. Webb DJ.

Title

Vitamin C has no effect on endothelium-dependent vasomotion and acute endogenous fibrinolysis in healthy smokers

Source

Journal of Cardiovascular Pharmacology. 44(1):117-124, 2004 Jul.

Abstract

Blood flow and plasma fibrinolytic factors were measured on five occasions in both forearms of eight otherwise healthy male smokers during unilateral brachial artery infusion of the endothelium-dependent vasodilator, substance P (2 to 8 pmol/min), and the endothelium-independent vasodilator, sodium nitroprusside (2 to 8 mug/min). On the first occasion, intra-arterial vitamin C was co-infused at 25 mg/min. On subsequent occasions, subjects attended after 28 and 35 days treatment with oral vitamin C (1 g daily) or placebo in a double-blind randomized crossover design still smoking but with and without acute smoke inhalation (3 cigarettes over 30 minutes). Basal plasma ascorbate concentrations

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increased from 37 +/- 6 mumol/L to 105 +/- 11 mumol/L following oral vitamin C supplementation (P = 0.002). Substance P caused dose-dependent increases in forearm blood flow (P < 0.001, ANOVA) and t-PA release (P < 0.05, ANOVA) that was unaffected by acute recent smoke inhalation, intra-arterial vitamin C, or oral vitamin C administration (p = ns). Likewise there were no effects on sodium nitroprusside-induced vasodilatation (p = ns). Neither acute local intra-arterial nor prolonged oral vitamin C supplementation reverses smoking-related endothelial dysfunction and impaired endogenous t-PA release. We conclude that the adverse vascular actions of smoking are not principally mediated through oxidative stress. [References: 36]

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<40>

Authors

Rhee EJ. Oh KW. Lee WY. Kim SW. Oh ES. Baek KH. Kang MI. Park CY. Choi MG. Yoo HJ. Park SW.

Title

Age, body mass index, current smoking history, and serum insulin-like growth factor-I levels associated with bone mineral density in middle-aged Korean men

Source

Journal of Bone & Mineral Metabolism. 22(4):392-398, 2004 Jul.

Abstract

Osteoporosis is a growing health problem in women and in men. This cross-sectional study examined the association of anthropometric, lifestyle, and hormonal factors with bone mineral density (BMD) in 152 healthy Korean middle-aged men. Smoking habits and alcohol consumption were assessed by interview. Serum testosterone and insulin-like growth factor-I (IGF-I) levels were measured by radioimmunoassay, and serum growth hormone (GH) levels were measured by immunoradiometric assay. GH stimulation tests were performed after the ingestion of 500 mg of L-dopa. BMD was measured at the lumbar spine and at the femoral neck by dual-energy X-ray absorptiometry. Of the middle-aged men, 3.9% were osteoporotic and 28.3% were osteopenic at the lumbar spine site, and 5.9% were osteoporotic and 45.4% were osteopenic at the femoral neck site. Lumbar spine BMD correlated significantly with body mass index (BMI), and femoral neck BMD correlated significantly with age, BMI, and serum IGF-I levels. The lowest quartile group for serum IGF-I levels showed the lowest femoral neck BMD. Osteoporotic men by lumbar spine BMD showed significant differences from the normal BMD group in terms of BMI and smoking habits. Also, osteoporotic men by femoral neck BMD were significantly different for mean age, BMI, and serum IGF-I levels compared with the normal BMD group. On multiple regression analysis, BMI was found to be the only independent predictor of lumbar spine BMD, whereas both BMI and serum IGF-I levels were found to be the independent predictors of femoral neck BMD. Overall, 28.3%-45.4% of middle-aged Korean men were osteopenic. We suggest that higher age, a lower BMI, current smoking history, and lower serum IGF-I levels are risk factors for lower BMD in middle-aged Korean men; however, serum testosterone levels and GH secretory capacity were not found to be correlated with BMD. [References: 45]

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Authors

Oddy WH, de Klerk NH, Kenda'll GE, Mijhrshahi S, Peat JK.

Title

Ratio of omega-6 to omega-3 fatty acids and childhood asthma

Source

Journal of Asthma. 41(3):319-326, 2004.

Abstract

Asthma is a leading cause of morbidity for children and is a major public health problem in Australia. Ecological and temporal data suggest that dietary factors may have a role in recent increases in the prevalence of asthma. Aim: The aim of conducting this study was to investigate whether childhood asthma was associated with the ratio of omega 6 (n-6) to omega 3 (n-3) fatty acids in the diet (n-6:n-3). Method: The Western Australian Pregnancy Cohort Study is a prospective birth cohort of 2602 children. Using a nested case-control cross-sectional study design within this cohort, a group of children were identified as cases with current asthma at 6 or at 8 years of age or as controls with no asthma at 6 or at 8 years. Dietary details including n-6 and n-3 fatty acid intake data were collected by parent response to a questionnaire when the children were 8 years old. Logistical regression was used to compare quantiles of n-6:n-3 intake in cases and controls. Adjustment was made for covariates: gender, gestational age, breastfeeding, older siblings, maternal smoking during pregnancy, maternal age, maternal asthma, child's current age in months, body mass index, total energy intake, and antioxidant intake (vitamins A, C, E, and zinc). Results: A response rate of 83% was achieved by providing complete data from 335 children [49% cases with current asthma (n=166), 51% controls (n=169)]. Following adjustment for covariates the association between the ratio of n-6:n-3 fatty acids and risk for current asthma was statistically significant (p=0.022). Conclusion: We found evidence for a modulatory effect of the dietary n-6:n-3 fatty acid ratio on the presence of asthma in children. Our results provide evidence that promotion of a diet with increased n-3 fatty acids and reduced n-6 fatty acids to protect children against symptoms of asthma is warranted. [References: 38]

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<42>

Authors

Ford ES, Mannino DM, Redd SC, Moriarty DG, Mokdad AH.

Title

Determinants of quality of life among people with asthma: Findings from the Behavioral Risk Factor Surveillance System

Source

Journal of Asthma. 41(3):327-336, 2004.

Abstract

Asthma is a major contributor to impaired quality of life in the U.S. population. Little is known about population-based determinants of quality of life among people with asthma, however. Using data from the 2000 Behavioral Risk Factor Surveillance System, we examined the associations between selected sociodemographic, behavioral, and other determinants and quality of life among 12,111 participants with current asthma. In multiple logistical regression models, three variables-employment status, smoking status, and physical activity-were significantly associated with all measures of impaired quality of life (poor or fair health, greater than or equal to 14 physically unhealthy days, greater than or equal to 14 mentally

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unhealthy days, greater than or equal to 14 activity limitation days, or greater than or equal to 14 physically or mentally unhealthy days). Education was significantly and inversely related to impaired quality of life for all measures except activity limitation days. Men were less likely than women to report having greater than or equal to 14 physically unhealthy days, greater than or equal to 14 mentally unhealthy days, or greater than or equal to 14 physically or mentally unhealthy days. Compared with whites, Hispanics were more likely to report being in poor or fair health, and African Americans were less likely to report having greater than or equal to 14 physically unhealthy days or greater than or equal to 14 physically or mentally unhealthy days. In addition, participants with lower incomes were more likely to report impaired quality of life for three measures (general health status, greater than or equal to 14 physically unhealthy days, and activity limitation days). The heaviest participants were more likely to be in poor or fair health or to report having more greater than or equal to 14 physically unhealthy days, or greater than or equal to 14 physically or mentally unhealthy days. Insurance coverage and the time since their last routine checkup were not significantly associated with any of the quality-of-life measures. These results show that three potentially modifiable factors (smoking status, physical activity, body mass index) are associated with quality of life among persons with asthma. Furthermore, among people with asthma, the elderly, women, poorly educated, and low-income participants are especially likely to experience impaired quality of life. [References: 48]

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<43>

Authors

Congdon N, Broman KW, Lai H, Munoz B, Bowie H, Gilber D, Wojciechowski R, Alston C, West SK.

Title

Nuclear cataract shows significant familial aggregation in an older population after adjustment for possible shared environmental factors

Source

Investigative Ophthalmology & Visual Science. 45(7):2182-2186, 2004 Jul.

Abstract

PURPOSE. To quantify the association between siblings in age-related nuclear cataract, after adjusting for known environmental and personal risk factors.

METHODS. All participants (probands) in the Salisbury Eye Evaluation (SEE) project and their locally resident siblings underwent digital slit lamp photography and were administered a questionnaire to assess risk factors for cataract including: age, gender, lifetime sun exposure, smoking and diabetes history, and use of alcohol and medications such as estrogens and steroids. In addition, blood pressure, body mass index, and serum antioxidants were measured in all participants. Lens photographs were graded by trained observers masked to the subjects' identity, using the Wilmer Cataract Grading System. The odds ratio for siblings for affectedness with nuclear cataract and the sibling correlation of nuclear cataract grade, after adjusting for covariates, were estimated with generalized estimating equations.

RESULTS. Among 307 probands (mean age, 77.6 +/- 4.5 years) and 434 full siblings (mean age, 72.4 +/- 7.4 years), the average sibship size was 2.7 per family. After adjustment for covariates, the probability of development of nuclear cataract was significantly increased (odds ratio

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[OR] = 2.07, 95% confidence interval [CI], 1.30-3.30) among individuals with a sibling with nuclear cataract (nuclear grade greater than or equal to 3.0). The final fitted model indicated a magnitude of heritability for nuclear cataract of 35.6% (95% CI: 21.0%-50.3%) after adjustment for the covariates.

CONCLUSIONS. Findings in this study are consistent with a genetic effect for age-related nuclear cataract, a common and clinically significant form of lens opacity. [References: 30]

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<44>

Authors

Miranda AI.

Title

An integrated numerical system to estimate air quality effects of forest fires

Source

International Journal of Wildland Fire. 13(2):217-226, 2004.

Abstract

Forest fires are an important source of various gases and particles emitted into the atmosphere that may affect the air quality on a local and/or larger scale. Currently, there is a growing awareness that smoke from wildland fires exposes individuals and populations to hazardous air pollutants. In order to understand and to simulate forest fire effects on air quality, several issues should be analysed and integrated: fire progression, fire emissions, atmospheric flow, smoke dispersion and chemical reactions. In spite of the available models to simulate smoke dispersion and the existence of some systems already covering the main questions, there still remains a lack of integration concerning fire progression. Photochemical pollution is also not included in these modelling systems. AIRFIRE is a numerical system, developed to estimate the effects of forest fires on air quality, integrating several components of the problem through the inclusion of different modules, namely the mesoscale meteorological model MEMO, the photochemical model MARKS, and the Rothermel fire spread model. The system was applied to simulate plume dispersion from a wildfire that occurred in a coastal area, close to Lisbon city, at the end of September 1991. Results, namely the obtained pollutants concentration fields, point to a significant impact on the local air quality. Obtained wind fields and concentration patterns revealed the presence of sea breezes and also the influence of the fire in the atmospheric flow. Estimated carbon monoxide concentration levels were very high, exceeding the recommended hourly limit value of the World Health Organization, and ozone concentration values pointed to photochemical production. [References: 31]

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Authors

Khawaja M. Tewfel-Salem M.

Title

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Agreement between husband and wife reports of domestic violence: evidence from poor refugee communities in Lebanon

Source

International Journal of Epidemiology. 33(3):526-533, 2004 Jun.

Abstract

Background This paper compares husband and wife reports of wife beating using household survey data collected from poor Palestinian refugee communities in Lebanon.

Methods The analyses are based on a matched data file of 417 currently married couples, drawn from a unique multi-purpose living conditions sample survey of about 3600 Palestinian refugee households interviewed in the spring and summer of 1999. Four outcomes (ever beaten, last year beating, beating during pregnancy, and injuries caused by beating) were analysed using Kappa statistics and per cent agreement. Logistic regression was used to analyse discordant reporting of wife beating during the year preceding the survey.

Results Husband and wives' reports of the four different outcomes are in 'good' agreement as judged by kappa coefficients, ranging from 0.62 for 'beaten during pregnancy' to 0.69 for 'injuries resulting from beating'. Prevalence estimates of domestic violence are also remarkably similar. However, findings from a multivariate logistic regression model on agreement regarding 'last year beating' show that only age of men was a significant predictor of agreement, controlling for education level, marital duration, region of residence, household size, health status, and consanguinity.

Conclusions Our findings show that men's self-reports of their violent behaviour against their wives are fairly congruent with those of their spouses, implying that the perpetrators, men, can be 'trusted' in providing basic information on 'beating histories' in epidemiological and demographic population-based investigations in contexts similar to ours. However, care should be taken in studies of young men's current beating behaviour using only their self-reports. [References: 25]

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<46>

Authors

da Costa JL. Navarro A. Neves JB. Martin M.

Title

Household wood and charcoal smoke increases risk of otitis media in childhood in Maputo

Source

International Journal of Epidemiology. 33(3):573-578, 2004 Jun.

Abstract

Background This study examined the association of otitis media in children <6 years old and the exposure to wood and charcoal smoke, as well as to other risk factors, in Maputo.

Methods Case-control study. In all 750 children matched by sex and age were enrolled in a hospital-community study. Cases were gathered from among children visiting the Central Hospital of Maputo with otitis media and controls were recruited in the same village as the cases. Conditional logistic regression was performed to evaluate, simultaneously, the effect of each risk factor.

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Results Cases were more likely to have been exposed to tobacco smoke (OR = 1.51), to wood (OR = 1.85) and charcoal (OR = 1.50) household smoke, to short term breastfeeding (OR = 1.47), and to live in overcrowded conditions (OR = 1.49). Multivariate analysis stratified by age groups (younger and older than 2 years) showed that cases were more likely to be exposed to wood and charcoal smoke than controls, regardless of age. Among children aged >2 years, Eustachian tube dysfunction was evident (OR = 3.06) particularly in those living in less overcrowded conditions.

Conclusions Findings of this study are consistent with earlier studies that have reported an association between parental smoking, short duration of breastfeeding, and Eustachian tube dysfunction. The association with wood and charcoal smoke indicates that there is a need to educate people regarding the avoidance of exposing their children to this environmental hazard. [References: 35]

Publication Type
Article

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<47>

Authors

Zarchi K. Akbar A. Naieni KH.

Title

Long-term pulmonary complications in combatants exposed to mustard gas: a historical cohort study

Source

International Journal of Epidemiology. 33(3):579-581, 2004 Jun.

Abstract

Background sulphur mustard (mustard gas), the most widely used chemical agent in the Iran-Iraq war, affects many organs including the skin, the gastrointestinal and respiratory tracts, and the central nervous system. The aim of this study was to assess the cumulative incidence rate and annual incidence rate of pulmonary complications, and the rate ratio of related factors.

Methods In a retrospective cohort study of 1337 soldiers with a history of mustard gas exposure, factors such as age, smoking habit, number of exposure episodes, and the use of gas masks were determined, together with an assessment of their relationship to the occurrence of long-term pulmonary complications. All patients residing in the Tehran area were enrolled in the study. Data collection was based on the subjects' medical records and included clinical, spirometric, and in some cases histopathological findings.

Results The cumulative incidence rate of pulmonary complications was 31.6%; the lowest annual incidence rate was noted during the first year of follow-up (0.75/1000), and the highest rate recorded in the seventh year (76.9/1000). Estimated relative risks (RR) for various age groups are as follows: 1.13 (95% CI: 0.88, 1.46) for those aged 21-25 years; 1.49 (95% CI: 1.10, 2.01) for ages 26-30; 1.70 (95% CI: 1.20, 2.40) for ages 31-35; and 2.09 (95% CI: 1.57, 2.77) for subjects aged greater than or equal to 36. RR with regard to other factors were: more than one versus single exposure 0.69 (95% CI: 0.42, 1.12); smoking versus non-smoking 1.08 (95% CI: 0.80, 1.45), and unprotected exposure versus protective mask use 3.04 (95% CI: 2.20, 4.20).

Conclusion The estimated risk of pulmonary complications from war exposure to mustard gas increased with age and for soldiers who had not worn masks. [References: 18]

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Article

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<48>

Authors

Qian ZM. Zhang JF. Korn LR. Wei FS. Chapman RS.

Title

Factor analysis of household factors: are they associated with respiratory conditions in Chinese children?

Source

International Journal of Epidemiology. 33(3):582-588, 2004 Jun.

Abstract

Background We explored methods to develop uncorrelated variables for epidemiological analysis models. They were used to examine associations between respiratory health outcomes and multiple household risk factors.

Methods We analysed data collected in the Four Chinese Cities Study (FCCS) to examine health effects on prevalence rates of respiratory symptoms and illnesses in 7058 school children living in the four Chinese cities: Lanzhou, Chongqing, Wuhan, and Guangzhou. We used factor analysis approaches to reduce the number of the children's lifestyle/household variables and to develop new uncorrelated 'factor' variables. We used unconditional logistic regression models to examine associations between the factor variables and the respiratory health outcomes, while controlling for other covariates.

Results Five factor variables were derived from 21 original variables: heating coal smoke, cooking coal smoke, socioeconomic status, ventilation, and environmental tobacco smoke (ETS) and parental asthma. We found that higher exposure to heating coal smoke was associated with higher reporting of cough with phlegm, wheeze, and asthma. Cooking coal smoke was not associated with any of the outcomes. Lower socioeconomic status was associated with lower reporting of persistent cough and bronchitis. Higher household ventilation was associated with lower reporting of persistent cough, persistent phlegm, cough with phlegm, bronchitis, and wheeze. Higher exposure to ETS and the presence of parental asthma were associated with higher reporting of persistent cough, persistent phlegm, cough with phlegm, bronchitis, wheeze, and asthma.

Conclusions Our study suggests that independent respiratory effects of exposure to indoor air pollution, heating coal smoke, and ETS may exist for the studied children. [References: 32]

Publication Type

Article

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Authors

Razi S. Akhtar S.

Title

Smoking among high school adolescents in Karachi, Pakistan

Source

International Journal of Epidemiology. 33(3):613-614, 2004 Jun.

Publication Type

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Letter

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<http://gateway.ovid.com/ovidweb.cgi?T=JS&MODE=ovid&PAGE=fulltext&NEWS=n&D=ccse&AUTOALERT=108381400%7c49>

<50>

Authors

Brown TLH. Muller MJ.

Title

Damage limitation in burn surgery

Source

Injury-International Journal of the Care of the Injured. 35(7):697-707, 2004 Jul.

Abstract

Burn injury differs from other types of trauma in the apparent lack of urgency for treatment. We argue that in order to limit physiological damage and the development of multi-organ failure, management of the burn wound must be immediate and aggressive. Supportive fluid treatment should be judicious in order to prevent excessive oedema causing wound extension. Some potential strategies utilising oral fluid resuscitation are discussed, and potential pharmacological interventions. When associated with other trauma, major burn injury has a detrimental effect on morbidity and mortality, and surgical management of both aspects of a patient's injuries are altered. (C) 2004 Elsevier Ltd. All rights reserved.
 [References: 80]

Publication type

Article

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<51>

Authors

Fefferman DS. Lodhavia PJ. Alsahli M. Falchuk KR. Peppercorn MA. Shah SA. Farrell RJ.

Title

Smoking and immunomodulators do not influence the response or duration of response to infliximab in Crohn's disease

Source

Inflammatory Bowel Diseases. 10(4):346-351, 2004 Jul.

Abstract

Objective: Clinical predictors for infliximab response are still unknown. Identifying predictors of response to infliximab in Crohn's disease may improve our selection of patients.

Methods: Two hundred patients with luminal (61%) or fistulous (39%) Crohn's disease and at least 6 months of follow-up following a total of 416 infliximab infusions were evaluated. Clinical response and duration of response were the primary endpoints.

Results: Patients with fistulous disease had a higher response rate (83% versus 70%, $P = 0.044$) and a significantly longer duration of response compared with patients with luminal disease (17.4 versus 10.1 wks, $P = 0.017$). For luminal disease, nonsmokers and smokers had similar response rates (74% versus 64%, $P = 0.5$) and similar durations of response (9.4 wks versus 8.4 wks, $P = 0.6$) while patients taking concurrent immunomodulators had similar response rates compared with those not taking immunomodulators (74% versus 71%, $P = 0.9$) and similar durations of response (10.4 wks versus 10.6 wks, $P = 0.9$). For fistulous disease, response rates (89%

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versus 83% $P = 0.9$) and duration of response (16.9 wks versus 10.1 wks, $P = 0.10$) were similar between nonsmokers and smokers and concurrent immunomodulators had no effect on response (89% versus 86%, $P = 0.9$) or duration of response (19.8 wks versus 15.4 wks, $P = 0.46$). Multivariable analysis confirmed that neither smoking, corticosteroids, immunomodulator therapy, gender, age, age of disease onset, disease duration, nor luminal disease location significantly influenced response or duration of response.

Conclusions: Patients with fistulous disease had a higher response rate and a significantly longer duration of response compared with patients with luminal disease. However, among patients with luminal or fistulous disease, neither smoking nor immunomodulators had any effect on response or duration of response. [References: 27]

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<52>

Authors

Algar OG. Pichini S. Basagana X. Puig C. Vall O. Torrent M. Harris J. Sunyer J. Cullinan P.

Title

Concentrations and determinants of NO2 in homes of Ashford, UK and Barcelona and Menorca, Spain

Source

Indoor Air. 14(4):298-304, 2004 Aug.

Abstract

This study examined indoor nitrogen dioxide (NO2) concentrations in Ashford, Kent (UK), Menorca Island and Barcelona city (Spain) and the contribution of their most important indoor determinants (e.g. gas combustion appliances and cigarette smoking). The homes examined ($n = 1421$) were those from infants recruited for the Asthma Multicentre Infants Cohort Study, which aimed to assess, using a standard protocol, the effects of pre- and post-natal environmental exposures in the inception of atopy and asthma. Indoor NO2 was measured using passive filter badges placed on a living room wall of the homes for between 7 and 15 days. Homes in the three centers had significantly different concentrations of indoor NO2, with those in Barcelona showing the highest levels (median NO2 levels: 5.79, 6.06 and 23.87 p.p.b. in Ashford, Menorca and Barcelona, respectively). Multiple regression analysis showed that the principal indoor determinants of NO2 concentrations in the three cohorts were the heating/cooking fuel used in the house (gas fire increased average NO2 concentrations by 1.27-fold and gas cooker by 2.13 times), parental cigarette smoking and season of measurement. Those variables significantly related to indoor NO2 accounted for 23, 14 and 39% of the variation in indoor NO2 concentration in Ashford, Barcelona and Menorca, respectively. In all the cohorts combined, 52% of the variation could be explained in this way. Although outdoor NO2 was not measured concurrently, its additional contribution was estimated. In conclusion, despite differences in indoor NO2 mean concentrations probably reflecting different outdoor NO2 level, home factors affecting indoor NO2 values and their specific contributions were constant across the three cohorts. [References: 20]

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Page 36

<53>

Authors

Fowler G.

Title

Giving up smoking

Source

Hospital Medicine. 65(6):376, 2004 Jun.

Publication Type

Letter

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<http://gateway.ovid.com/ovidweb.cgi?T=JS&MODE=ovid&PAGE=fulltext&NEWS=n&D=ccse&AUTOA&LERT=108381400%7c53>

<54>

Authors

Dondero M. Cisternas F. Carvajal L. Simpson R.

Title

Changes in quality of vacuum-packed cold-smoked salmon (*Salmo salar*) as a function of storage temperature

Source

Food Chemistry. 87(4):543-550, 2004 Oct.

Abstract

Changes in the quality of vacuum-packed cold-smoked salmon (*Salmo salar*) were evaluated through a systematic study of biochemical, microbiological and sensory analyses during storage at different temperatures (0, 2, 4, 6 and 8 degreesC). TVB, TMA, K value, total aerobic and anaerobic counts and *Lactobacillus* spp., showed significant correlation (p less than or equal to 0.05) with storage time, temperature and sensory quality. Hypoxanthine (Hx), biogenic amines, molds and yeasts were not considered good objective indicators of sensory quality. Shelf lives of smoked-salmon stored at 0, 2, 4, 6 and 8 degreesC were 26, 21, 20, 10 and 7 days, respectively. *Lactobacillus* spp., were dominant in terms of deterioration in quality. Pathogenic microorganisms (*Clostridium botulinum*, *Salmonella*, *Coliform*, *Staphylococcus aureus* and *Listeria monocytogenes*) were not detected during the time of storage. (C) 2004 Elsevier Ltd. All rights reserved.

[References: 36]

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<55>

Authors

Claridge MW. Hobbs SD. Quick CR. Day NE. Bradbury AW. Wilmsink ABM.

Title

ACE inhibitors increase type III collagen synthesis: A potential explanation for reduction in acute vascular events by ACE inhibitors

Source

European Journal of Vascular & Endovascular Surgery. 28(1):67-70, 2004 Jul.

Abstract

Introduction. Large trials have shown that angiotensin converting enzyme inhibitor (ACE-I) therapy reduces the risk of myocardial infarction and stroke. Acute vascular events are thought to be initiated by plaque rupture. Animal models of atherosclerosis show an increase in extra cellular matrix when given ACE-I therapy. ACE-I therapy could influence

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collagen synthesis, one of the major constituents of the atherosclerotic cap.

Methods. A nested case-control study was performed within the Huntingdon Aneurysm Screening Project. Subjects were assessed for arterial disease, drug history and smoking. Blood samples were taken for a measure of collagen synthesis, the amino-terminal propeptide of type III procollagen (PIIINP), lipid levels, iron metabolism and cotinine levels.

Results. Information was available for 420 subjects. Thirty-five were taking ACE-I therapy and 385 were not. Mean serum PIIINP level was 3.5 mug/l (sd 1.3 mug/l, range: 1.7-16.5 mug/l). There was a marked increase in mean collagen turnover between subjects taking ACE-I therapy compared to those not. Mean PIIINP level for cases and controls was 4.26 mug/l (95% CI: 3.73-4.79 mug/l) versus 3.61 mug/l (95% CI: 3.48-3.75 mug/l). No differences were found for patients taking other antihypertensive drugs. After adjusting for age, weight, height, lipid levels and ferritin, PIIINP levels remained significantly higher in cases than controls: 4.14 mug/l (95% CI: 3.72-4.57 mug/l) versus 3.62 mug/l (95% CI: 3.49-3.75 mug/l) (P -value 0.02).

Discussion. These results suggest that ACE-I therapy up-regulates collagen synthesis, and could improve plaque stabilisation. This may provide an explanation for the decrease in acute vascular events observed in patients on ACE-I therapy. [References: 16]

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<56>

Authors

Janhunen S. Ahtee L.

Title

Comparison of the effects of nicotine and epibatidine on the striatal extracellular dopamine

Source

European Journal of Pharmacology. 494(2-3):167-177, 2004 Jun 28.

Abstract

We compared the effects of nicotine and epibatidine on striatal extracellular dopamine and its metabolites, 3,4-dihydroxyphenylacetic acid (DOPAC) and homovanillic acid (HVA), by microdialysis in freely moving rats. Nicotine (0.5 mg/kg) elevated dopamine in the caudate-putamen and somewhat more in the nucleus accumbens. Epibatidine at 0.3 mug/kg reduced, and at 0.6 and 1.0 mug/kg increased, dopamine in the caudate-putamen; 2.0 and 3.0 mug/kg had no effect. Accumbal dopamine epibatidine elevated only at 3.0 mug/kg. Thus, in contrast to nicotine, epibatidine increased dopamine output in the caudate-putamen at smaller doses than in the accumbens. Both epibatidine and nicotine enhanced accumbal dopamine metabolism clearly more than that in the caudate-putamen. Also epibatidine was found to elevate 5-hydroxyindoleacetic acid (5-HIAA) in the nucleus accumbens at smaller doses than in the caudate-putamen. Similarly to what has been reported concerning nicotine, the dose-response curve of epibatidine to increase the dopamine output in the caudate-putamen was bell-shaped and clearly differed from that in the accumbens. These findings indicate that the nicotinic mechanisms controlling dopamine release and metabolism in the nigrostriatal and mesolimbic dopaminergic pathways differ fundamentally. (C) 2004 Elsevier B.V. All rights reserved.

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<57>

Authors

Roncaglioni MC, Avanzini F, Roccatagliata D, Monesi L, Tamayo-Benitez D, Tombesi M, Caimi V, Longoni P, Lauri D, Barlera S, Tognoni G.

Title

How general practitioners perceive and grade the cardiovascular risk of their patients

Source

European Journal of Cardiovascular Prevention & Rehabilitation.
11(3):233-238, 2004 Jun.

Abstract

Background Although risk assessment charts have been proposed to identify patients at high cardiovascular risk, in everyday practice general practitioners (GPs) often use their knowledge of the patients to estimate the risk subjectively.

Design A cross-sectional study aimed to describe how GPs perceive, qualify and grade cardiovascular risk in everyday practice.

Methods General practitioners had to identify in a random sample of 10% of their contacts the first 20 consecutive patients perceived as being at cardiovascular risk. For each patient essential data were collected on clinical history, physical examination and laboratory tests, for the qualification of risk. At the end of the process GPs subjectively estimated the overall patient's level of risk. General practitioners grading was compared with the risk estimate from a reference chart.

Results Over a mean time of 25 days 3120 patients perceived as being at cardiovascular risk were enrolled. According to the inclusion scheme each GP had contact with more than 200 patients at cardiovascular risk every month. Thirty percent of these patients had atherosclerotic diseases. Up to 72% of patients without any history of atherosclerotic diseases but perceived to be at risk could be classified according to a reference chart as being at moderate to very high risk. Comparing GPs' grading of risk with a chart estimate there was agreement in 42% of the cases. Major determinants of GPs' underestimation of risk were age, sex and smoking habits, while obesity and family history were independently associated with overestimation.

Conclusions On the basis of their perception GPs properly identify patients at cardiovascular risk in the majority of cases. General practitioners subjective grading of risk level only partially agreed with that given by a chart. (C) 2004 The European Society of Cardiology. [References: 21]

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<58>

Authors

Mayer O, Simon J, Holubec L, Pikner R, Vobrubova I, Trefil L.

Title

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Fibrate treatment and prevalence risk of mild hyperhomocysteinaemia in clinical coronary heart disease patients

Source

European Journal of Cardiovascular Prevention & Rehabilitation.
11(3):244-249, 2004 Jun.

Abstract

Background Several prospective studies reported that fibrates might increase blood total homocysteine (tHcy). In this study we aimed to establish whether the reported fibrate treatment was associated with an increased risk of mild hyperhomocysteinaemia in patients with clinical coronary heart disease, and to establish whether confounding variables may influence this effect.

Design A retrospective, case-control analysis.

Methods A total of 410 patients, 301 males and 109 females, mean age 59.2 were examined in a Czech sample from the EUROASPIRE II survey. In addition to examinations and measurements, defined by the protocol, we estimated serum total homocysteine (tHcy), folate, B12 vitamin and methylenetetrahydrofolate reductase (MTHFR) genotypes.

Results We found significantly higher tHcy concentrations in patients with reported treatment with fibrate (16.6 +/- 0.66 mmol/l) compared with no lipid-lowering treatment (13.5 +/- 0.64 mmol/l, P < 0.001) or to statin (12.4 +/- 0.38 mmol/l, P < 0.001). Concentrations of tHcy greater than or equal to 15 mmol/l (i.e. mild hyperhomocysteinaemia) as a dependent variable were positively associated with age (OR 1.18, P < 0.0003), serum vitamin B12 (OR 0.87, P < 0.003), serum creatinine (OR 1.35, P < 0.0001) and treatment with fibrates (OR 1.30, P < 0.0001), using multiple regression. Using unifactorial or multifactorial analyses, association between fibrate and tHcy is independent from conventional confounders such as age, gender, smoking, folate or B12 concentration, serum creatinine and MTHFR genotypes, however interference of low folate or B12 and fibrate treatment resulted in concentrations of tHcy more than 20 mmol/l.

Conclusions Fibrate treatment was associated with a significant increase in prevalence of the risk of mild hyperhomocysteinaemia in coronary patients, independently from conventional confounders. (C) 2004 The European Society of Cardiology. [References: 28]

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Authors

Charbonnel B, Dormandy J, Erdmann E, Massi-Benedetti M, Skene A.

Title

The Prospective Pioglitazone Clinical Trial in Macrovascular Events (PROactive) - Can pioglitazone reduce cardiovascular events in diabetes? - Study design and baseline characteristics of 5,238 patients

Source

Diabetes Care. 27(7):1647-1653, 2004 Jul.

Abstract

OBJECTIVE -The PROspective pioglitazone Clinical Trial in macroVascular Events (PROactive) assesses the effect of pioglitazone, a peroxisome proliferator-activated receptor agonist, with anti-inflammatory and vascular properties, on the secondary prevention of macrovascular events in type 2 diabetes.

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RESEARCH DESIGN AND METHODS - PROactive is an on-going randomized, double-blind Outcome Study in Patients With type 2 diabetes managed with diet and/or oral blood glucose-lowering drugs (combination of oral agents with insulin is permitted) who have a history of macrovascular disease. Patients are randomized to receive pioglitazone (forced titration from 15 to 30 to 45 mg, depending on tolerability) or placebo in addition to existing therapy. The primary end point is the time from randomization to occurrence of a new macrovascular event or death. Follow-up is estimated to span 4 years.

RESULTS - A total of 5,238 patients have been randomized from 19 countries. At entry into the study, patients enrolled are a mean age of 61.8 years, with type 2 diabetes for a mean of 9.5 years, 60.9 and 61.5% are taking metformin or a sulfonylurea, respectively, and 33.6% are using insulin in addition to oral glucose-lowering drugs. The majority of patients are men (66.1%). Patients are required to meet one or more of entry criteria, as follows: >6 months' history of myocardial infarction (46.7%); coronary artery revascularization (30.8%); stroke (18.8%); or acute coronary syndrome for >3 months (13.7%); other evidence of coronary artery disease (48.1%); or peripheral arterial occlusive disease (19.9%). One-half (48.5%) of patients have two or more of these risk factors. Three-quarters (75.4%) have hypertension, and 58.8% are current or previous smokers.

CONCLUSIONS - The cohort of patients enrolled in PROactive is a typical type 2 diabetic population at high risk of further macrovascular events. The characteristics of this population are ideal for assessing the ability of pioglitazone to reduce the cardiovascular risk of patients with type 2 diabetes. [References: 61]

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<60>

Authors

Hollund-Carlson PF, Marving J, Gadsboll N, Rasmussen S, Lonborg-Jensen H, Nielsen MD, Christensen NJ, Jensen BH.

Title

Acute effects of smoking on left ventricular function and neuro-humoral responses in patients with known or suspected ischaemic heart disease

Source

Clinical Physiology & Functional Imaging. 24(4):216-223, 2004 Jul.

Abstract

Systolic left ventricular function was examined by radionuclide ventriculography in 12 habitual smokers with known or suspected ischaemic heart disease, aged 33-69 years, before, during, and after smoking of two cigarettes in a row and was repeated on a non-smoking control day. Plasma concentrations of adrenaline, noradrenaline, renin, and angiotensin II were determined on the smoking day, before and immediately after smoking. During smoking, there were significant increases in heart rate (+27%), rate-pressure product (+23%), and cardiac output (+14%) in the face of a significant increase in left ventricular end-systolic volume (+5%) and significant decreases in ejection fraction (-6%) and stroke volume (-8%). Blood pressure was virtually unchanged, and total peripheral resistance remained constant. Plasma adrenaline increased by 100%, renin decreased by 21%, and noradrenaline and angiotensin II did not change. The humoral changes were not correlated to changes in any of the haemodynamic variables. Areas of myocardial hypokinesia emerged or widened during smoking in 11 of 12 patients. Thus, in patients with known or suspected

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ischaemic heart disease, smoking was associated with an acute decrease in systolic ventricular function and development of widespread hypokinesia despite adrenaline stimulation. [References: 53]

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<61>

Authors

Sakagami M.

Title

Insulin disposition in the lung following oral inhalation in humans [Review]

Source

Clinical Pharmacokinetics. 43(8):539-552, 2004.

Abstract

Background: Oral inhalation of insulin potentially offers non-invasive treatment and better glycaemic control in diabetes by virtue of its apparently faster absorption into the systemic circulation compared with subcutaneous injection. Nevertheless, the lung kinetics of inhaled insulin in humans have yet to be fully clarified because of the complexity of insulin-glucose (patho)physiology and the difficulty in approximating the inhaled dose. As a result, there remains considerable debate on the mechanisms of absorption and metabolism of insulin in the lung.

Objectives: To develop and apply a physiologically realistic insulin-glucose kinetic model to a meta-analysis of insulin-glucose profiles from well-controlled clinical studies of inhaled insulin published in the literature, and thereby, to derive the kinetic descriptors of insulin in the lung following inhalation through curve fitting. **Model development:** The model assumed first-order absorption ($k(a,L)$) and parallel non-absorptive loss ($k(mm,L)$), the latter primarily occurring via metabolism and mucociliary clearance in the lung, alongside two systemic compartments. Where necessary, glucose-dependent endogenous pancreatic insulin secretion was also taken into account by using blood glucose data as the second independent variable.

Results: Despite the model's simplicity and the use of mean data, 16 insulin-glucose profiles from ten clinical studies were successfully fitted to the model, yielding values for the rate constants $k(a,L)$ and $k(mm,L)$. Whole serum insulin profiles were rate-determined by $k(a,L)$ and $k(mm,L)$ combined, representing 'flip-flop' pharmacokinetics. The best estimate for $k(a,L)$ was found to be 0.020-0.032 h⁻¹, effectively unchanged across doses (0.3-1.8 IU/kg), formulations (powder vs liquid) and subjects (healthy vs diabetic), suggesting passive diffusive absorption of insulin from the lung. In contrast, the values for $k(mm,L)$ were much larger (0.5-1.6 h⁻¹) and decreased with increasing inhaled dose. Therefore, it is likely that dose-dependent saturable lung metabolism controls the value of $k(mm,L)$, alongside mucociliary clearance. As a result, the absolute bioavailability ranged from 1.5% to 4.8%. The modelling analysis also enabled derivation of increased values for both $k(a,L)$ and $k(mm,L)$ as a possible cause of faster absorption for deep inspiratory manoeuvres and increased absorption in smokers, and faster and increased absorption for insulin lispro.

Conclusions: Although some of these results need to be substantiated experimentally, it appears that this modelling analysis has enabled unification of the literature information associated with the kinetics and mechanisms of insulin disposition in the lung following inhalation in

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humans. [References: 61]
Publication Type
Review

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<62>

Authors

Navas-Acien A. Solvin E. Sharrett AR. Calderon-Aranda E. Silbergeld E. Guallar E.

Title

Lead, cadmium, smoking, and increased risk of peripheral arterial disease

Source

Circulation. 109(25):3196-3201, 2004 Jun 29.

Abstract

Background-Lead and cadmium exposure may promote atherosclerosis, although the cardiovascular effects of chronic low-dose exposure are largely unknown. The objective of the present study was to evaluate the association between blood levels of lead and cadmium and peripheral arterial disease.

Methods and Results-We analyzed data from 2125 participants who were greater than or equal to 40 years of age in the 1999 to 2000 National Health and Nutrition Examination Survey (NHANES). Peripheral arterial disease was defined as an ankle brachial index <0.9 in at least 1 leg. Lead and cadmium levels were measured by atomic absorption spectrometry. After adjustment for demographic and cardiovascular risk factors, the ORs of peripheral arterial disease comparing quartiles 2 to 4 of lead with the lowest quartile were 1.63 (95% CI, 0.51 to 5.15), 1.92 (95% CI, 0.62 to 9.47), and 2.88 (95% CI, 0.87 to 9.47), respectively (P for trend = 0.02). The corresponding ORs for cadmium were 1.07 (95% CI, 0.44 to 2.60), 1.30 (95% CI, 0.69 to 2.44), and 2.82 (95% CI, 1.36 to 5.85), respectively (P for trend = 0.01). The OR of peripheral arterial disease for current smokers compared with never smokers was 4.13. Adjustment for lead reduced this OR to 3.38, and adjustment for cadmium reduced it to 1.84.

Conclusions-Blood lead and cadmium, at levels well below current safety standards, were associated with an increased prevalence of peripheral arterial disease in the general US population. Cadmium may partially mediate the effect of smoking on peripheral arterial disease. [References: 37]

Publication Type
Article

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<http://gateway.ovid.com/ovidweb.cgi?T=JS&MODE=ovid&PAGE=fulltext&NEWS=n&D=CCSE&AUTOA LERT=108381400%7c62>

<63>

Authors

Brady AR. Thompson SG. Fowkes FGR. Greenhalgh RM. Powell JT.

Title

Abdominal aortic aneurysm expansion - Risk factors and time intervals for surveillance

Source

Circulation. 110(1):16-21, 2004 Jul 6.

Abstract

Background - Intervention to reduce abdominal aortic aneurysm (AAA) expansion and optimization of screening intervals would improve current

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surveillance programs. The aim of this study was to characterize AAA growth in a national cohort of patients with AAA both overall and by cardiovascular risk factors.

Methods and Results - In this study, 1743 patients were monitored for changes in AAA diameter by ultrasonography over a mean follow-up of 1.9 years. Mean initial AAA diameter and growth rate were 43 mm (range 28 to 85 mm) and 2.6 mm/year (95% range, -1.0 to 6.1 mm/year), respectively. Baseline diameter was strongly associated with growth, suggesting that AAA growth accelerates as the aneurysm enlarges. AAA growth rate was lower in those with low ankle/brachial pressure index and diabetes but higher for current smokers (all $P < 0.001$). No other factor (including lipids and blood pressure) was associated with AAA growth. Intervals of 36, 24, 12, and 3 months for aneurysms of 35, 40, 45, and 50 mm, respectively, would restrict the probability of breaching the 55-mm limit at rescreening to below 1%.

Conclusions - Annual, or less frequent, surveillance intervals are safe for all AAAs ≤ 45 mm in diameter. Smoking increases AAA growth, but atherosclerosis plays a minor role. [References: 25]

Publication Type
Article

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<http://gateway.ovid.com/ovidweb.cgi?T=JS&MODE=ovid&PAGE=fulltext&NEWS=n&D=CCSE&AUTOA LERT=108381400%7c63>

<64>

Authors

Gazzaruso C. Giordanetti S. De Amici E. Bertone G. Falcone C. Geroldi D. Fratino P. Solerte SB. Garzaniti A.

Title

Relationship between erectile dysfunction and silent myocardial ischemia in apparently uncomplicated type 2 diabetic patients

Source

Circulation. 110(1):22-26, 2004 Jul 6.

Abstract

Background - Erectile dysfunction (ED) is associated with coronary artery disease (CAD). In diabetic patients, CAD is often silent. Among diabetic patients with silent CAD, the prevalence of ED has never been evaluated. We investigated whether ED is associated with asymptomatic CAD in type 2 diabetic patients.

Methods and Results - We evaluated the prevalence of ED in 133 uncomplicated diabetic men with angiographically verified silent CAD and in 127 diabetic men without myocardial ischemia at exercise ECG, 48-hour ambulatory ECG, and stress echocardiography. The groups were comparable for age and diabetes duration. Patients were screened for ED using the validated International Index of Erectile Function (IIEF-5) questionnaire. The prevalence of ED was significantly higher in patients with than in those without silent CAD (33.8% versus 4.7%; $P = 0.000$). Multiple logistic regression analysis showed that ED, apolipoprotein(a) polymorphism, smoking, microalbuminuria, HDL, and LDL were significantly associated with silent CAD; among these risk factors, ED appeared to be the most efficient predictor of silent CAD (OR, 14.8; 95% CI, 3.8 to 56.9).

Conclusions - Our study first shows a strong and independent association between ED and silent CAD in apparently uncomplicated type 2 diabetic patients. If our findings are confirmed, ED may become a potential marker to identify diabetic patients to screen for silent CAD. Moreover, the high prevalence of ED among diabetics with silent CAD suggests the need to perform an exercise ECG before starting a treatment for ED, especially in

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patients with additional cardiovascular risk factors. [References: 33]
Publication Type
Article

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<http://gateway.ovid.com/ovidweb.cgi?T=JS&MODE=ovid&PAGE=fulltext&NEWS=n&D=ccse&AUTOA LERT=108381400%7c64>

<65>

Authors

Whincup PH, Gilg JA, Emberson JR, Jarvis MJ, Feyerabend C, Bryant A, Walker M, Cook DG.

Title

Passive smoking and risk of coronary heart disease and stroke: prospective study with cotinine measurement

Source

British Medical Journal. 329(7459):200-204, 2004 Jul 24.

Abstract

Objective To examine the associations between a biomarker of overall passive exposure to tobacco smoke (serum cotinine concentration) and risk of coronary heart disease and stroke.

Design Prospective population based study in general practice (the British regional heart study).

Participants 4729 men in 18 towns who provided baseline blood samples (for cotinine assay) and a detailed smoking history in 1978-80.

Main outcome measure Major coronary heart disease and stroke events (fatal and non-fatal) during 20 years of follow up.

Results 2105 men who said they did not smoke and who had cotinine concentrations <14.1 ng/ml were divided into four equal sized groups on the basis of cotinine concentrations. Relative hazards (95% confidence intervals) for coronary heart disease in the second (0.8-1.4 ng/ml), third (1.5-2.7 ng/ml), and fourth (2.8-14.0 ng/ml) quarters of cotinine concentration compared with the first (<0.7 ng/ml) were 1.45 (1.01 to 2.08), 1.49 (1.03 to 2.14), and 1.57 (1.08 to 2.28), respectively, after adjustment for established risk factors for coronary heart disease. Hazard ratios (for cotinine 0.8-14.0 v <0.7 ng/ml) were particularly increased during the first (3.73, 1.32 to 10.58) and second five year follow up periods (1.95, 1.09 to 3.48) compared with later periods. There was no consistent association between cotinine concentration and risk of stroke.

Conclusion Studies based on reports of smoking in a partner alone seem to underestimate the risks of exposure to passive smoking. Further prospective studies relating biomarkers of passive smoking to risk of coronary heart disease are needed. [References: 30]

Publication Type
Article

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<http://gateway.ovid.com/ovidweb.cgi?T=JS&MODE=ovid&PAGE=fulltext&NEWS=n&D=ccse&AUTOA LERT=108381400%7c65>

<66>

Authors

Laporte K, Pernes P, Pronni P, Gottrand F, Vincent P.

Title

Acquisition of Helicobacter pylori infection after outbreaks of gastroenteritis: prospective cohort survey in institutionalised young
Page 45

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people

Source

British Medical Journal. 329(7459):204-205, 2004 Jul 24.

Publication Type

Article

This link leads to available full-text or the complete reference.
<http://gateway.ovid.com/ovidweb.cgi?T=JS&MODE=ovid&PAGE=fulltext&NEWS=n&D=ccse&AUTOA LERT=108381400%7c66>

<67>

Authors

Ramirez-Tortosa MC, Garcia-Alonso J, Vidal-Guevara ML, Quiles JL.

Periago MJ, Linde J, Mesa MD, Ros G, Abellan P, Gil A.

Title

Oxidative stress status in an institutionalised elderly group after the intake of a phenolic-rich dessert

Source

British Journal of Nutrition. 91(6):943-950, 2004 Jun.

Abstract

The elderly population undergoes a series of physiological and sociological changes common to old age with a high probability of suffering degenerative illness and malnutrition. A dessert rich in phenolic compounds has been designed by using concentrated juices of grape, cherry, blackberry, blackcurrant and raspberry with the aim of it being used as a complementary food in adulthood. In the present study, we investigated the effect of the intake of this dessert (a jar of 200 g daily for a period of 2 weeks), with an antioxidant activity equivalent to ten servings of fruits and vegetables, on several markers of oxidative and antioxidant status in DNA and plasma in a group of elderly individuals. Non-smoking institutionalised elderly subjects were recruited from a pool of volunteers in an old-age home in Murcia (Spain). Twenty-two subjects (six men and sixteen women) participated in the study. The study was designed as a randomised intervention trial with a period of 2 weeks. At days 1 and 15, blood samples were collected to analyse total antioxidant capacity, biochemical parameters, antioxidant vitamins, LDL peroxidation, and DNA damage in peripheral blood lymphocytes. The conclusion of the present study is that a 2-week intervention with our dessert enriched with natural polyphenol compounds in elderly individuals does not give enough time to find changes in the antioxidant and oxidative status. Also, the view that the marked antioxidant ability of polyphenols in vitro does not translate to analogous effects in vivo was confirmed. Moreover, a highly oxidative stress status during ageing was confirmed, together with the need to perform follow-up nutritional studies to improve this situation.

[References: 44]
Publication Type

Article

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<68>

Authors

Werler MM, Sheehan JE, Hayes C, Mitchell AA, Mulliken JB.

Title

Vasoactive exposures, vascular events, and hemifacial microsomia

Source

Birth Defects Research. 70(6):389-395, 2004 Jun.

Abstract

BACKGROUND: Based on experimental evidence and clinical observations,
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hemifacial microsomia (HFM) is one of several structural anomalies that are postulated to result from vascular disruption. We collected data in a case-control study to identify whether vasoactive exposures or vascular events during early pregnancy affect the risk of HFM. METHODS: Cases with a diagnosis of HFM were identified at craniofacial centers in 26 cities across the United States and Canada, from 1996 to 2002. Controls were matched to cases by age and pediatrician practice. Mothers of 230 cases and 678 controls were interviewed about pregnancy events and exposures. Case and control mothers were compared for early pregnancy use of vasoactive medications, cigarettes, and alcohol; singleton or multiple gestation; and diabetes, hypertension, or vaginal bleeding in the first half of pregnancy. RESULTS: Odds ratios (ORs) were significantly increased for vasoactive medication use (OR, 1.9 overall; OR, 4.2 among smokers), multiple gestations (OR, 10.5), and diabetes (OR, 6.0). Vaginal bleeding in the second trimester and heavy alcohol intake were associated with increased risks, but the estimates were based on small numbers and, therefore, are unstable. No associations were observed for cigarette smoking without vasoactive medication use, hypertension, and vaginal bleeding in the first trimester. CONCLUSIONS: The increased risks of HFM associated with vasoactive medication use, multiple gestations, diabetes, and second trimester vaginal bleeding appear collectively to support the hypothesis that vascular disruption is one etiology for HFM, because each of these factors is related to effects on blood vessels. (C) 2004 Wiley-Liss, Inc. [References: 32]

Publication Type
Article

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<http://gateway.ovid.com/ovidweb.cgi?T=JS&MODE=ovid&PAGE=fulltext&NEWS=n&D=ccse&AUTOALERT=108381400%7c68>

<69>

Authors

Dukat M. Taroua M. Dahdouh A. Siripurapu U. Damaj MI. Martin BR. Glennon RA.

Title

(+/-)-8-amino-5,6,7,8-tetrahydroisoquinolines as novel antinociceptive agents

Source

Bioorganic & Medicinal Chemistry Letters. 14(14):3651-3654, 2004 Jul 16.

Abstract

Several amine-substituted 8-amino-5,6,7,8-tetrahydroisoquinolines were examined as conformationally-constrained analogs of the nicotinic cholinergic (nACh) 3-(aminomethyl)pyridines. Although these ligands failed to bind at nACh receptors, the N-ethyl-N-methyl analog 3d was found to be at least equipotent with nicotine in rodent tests of antinociception. The mechanism of action of 3d is currently unknown. (C) 2004 Elsevier Ltd. All rights reserved. [References: 9]

Publication Type
Article

This link leads to available full-text or the complete reference.
<http://gateway.ovid.com/ovidweb.cgi?T=JS&MODE=ovid&PAGE=fulltext&NEWS=n&D=ccse&AUTOALERT=108381400%7c69>

<70>

Authors

Tapiero H.

Title

Influence of alcohol consumption and smoking habits on human health (vol 58, pg 75, 2004)

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Source

Biomedicine & Pharmacotherapy. 58(5):344, 2004 Jun.

Publication Type

Correction, Addition

This link leads to available full-text or the complete reference.

<http://gateway.ovid.com/ovidweb.cgi?T=JS&MODE=ovid&PAGE=fulltext&NEWS=n&D=ccse&AUTOALERT=108381400%7c70>

<71>

Authors

Cheatham CC. Caine-Bish N. Blegen M. Potkanowicz ES. Glickman EL.

Title

Nicotine effects on thermoregulatory responses of men and women during acute cold exposure

Source

Aviation Space & Environmental Medicine. 75(7):589-595, 2004 Jul.

Abstract

Introduction: Due to the impact of nicotine (NIC) on the physiological processes involved in temperature regulation during cold exposure, it is conceivable that NIC may affect the body's thermoregulatory abilities during a cold stress. Thus, the purpose of this study was to examine the effects of NIC on thermoregulatory responses during acute cold exposure. Methods: There were six men and six women between the ages of 18 and 25 yr who participated in this study. All subjects were active, apparently healthy smokers. Each subject performed two cold air trials consisting of a 30-min baseline period (BASE) and a 120-min exposure to 10degreesC air. One cold air trial was performed following a NIC dosing using a 21-mg transdermal patch while the other trial was performed after a placebo (PL) treatment. Results: During the cold air trials, there were no differences in rectal temperature (T-re) or mean skin temperature (T-sk) between the PL and NIC treatments in either sex (p > 0.05). However, in men, heat production (M) was 12% lower (p less than or equal to 0.05) and tissue insulation was 17% higher (p less than or equal to 0.05) during the NIC treatment compared with the PL treatment, while these responses in women were unaffected. In both men and women, finger skin vascular conductance (SVCfin), expressed as a percentage of the BASE value, was higher during the NIC treatment compared with the PL treatment during the cold air trials (p less than or equal to 0.05). Lastly, throughout the cold air trials, there was no difference in thermal sensation between the PL and NIC treatments (p > 0.05). Discussion: In conclusion, although NIC administration resulted in sex-specific alterations in M and tissue insulation during cold exposure, the response in T-re was unaffected. [References: 42]

Publication Type
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<http://gateway.ovid.com/ovidweb.cgi?T=JS&MODE=ovid&PAGE=fulltext&NEWS=n&D=ccse&AUTOALERT=108381400%7c71>

<72>

Authors

Soukoulis S. Hirsch R.

Title

The effects of a tea tree oil-containing gel on plaque and chronic gingivitis

Source

Australian Dental Journal. 49(2):78-83, 2004 Jun.

Abstract

Background: This clinical study assessed the effects of topically applied

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tea-tree oil (TTO)-containing gel on dental plaque and chronic and gingivitis.

Methods: This was a double-blind, longitudinal, non-crossover study in 49 medically fit non-smokers (24 males and 25 females) aged 18-60 years with severe chronic gingivitis. Subjects were randomly assigned to three groups and given either TTO-gel (2.5 per cent), chlorhexidine (CHX) gel (0.2 per cent), or a placebo gel to apply with a toothbrush twice daily. Treatment effects were assessed using the Gingival Index (GI), Papillary Bleeding Index (PBI) and plaque staining score (PSS) at four and eight weeks.

Results: No adverse reactions to any of the gels were reported. The data were separated into subsets by tooth (anterior and posterior) and tooth surface (buccal and lingual). The TTO group had significant reduction in PBI and GI scores. However, TTO did not reduce plaque scores which tended to increase over the latter weeks of the study.

Conclusion: Although further studies are required, the anti-inflammatory properties of TTO-containing gel applied topically to inflamed gingival tissues adjunct to chemotherapeutic periodontal therapy. [References: 30]

Publication Type
Article

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<http://gateway.ovid.com/ovidweb.cgi?T=JS&MODE=ovid&PAGE=fulltext&NEWS=n&D=ccse&AUTOALERT=1083814007c72>

<73>

Authors

Trebs I. Meixner FX. Slanina J. Otjes R. Jongejan P. Andreae MO.

Title

Real-time measurements of ammonia, acidic trace gases and water-soluble inorganic aerosol species at a rural site in the Amazon Basin [Review]

Source

Atmospheric Chemistry & Physics. 4:967-987, 2004 Jun 28.

Abstract

We measured the mixing ratios of ammonia (NH₃), nitric acid (HNO₃), nitrous acid (HONO), hydrochloric acid (HCl), sulfur dioxide (SO₂) and the corresponding water-soluble inorganic aerosol species, ammonium (NH₄⁺), nitrate (NO₃⁻), nitrite (NO₂⁻), chloride (Cl⁻) and sulfate (SO₄²⁻), and their diel and seasonal variations at a pasture site in the Amazon Basin (Rondonia, Brazil). This study was conducted within the framework of LBA-SMOCC (Large Scale Biosphere Atmosphere Experiment in Amazonia-Smoke Aerosols, Clouds, Rainfall and Climate: Aerosols from Biomass Burning Perturb Global and Regional Climate). Sampling was performed from 12 September to 14 November 2002, extending from the dry season (extensive biomass burning activity), through the transition period to the wet season (background conditions). Measurements were made continuously using a wet-annular denuder (WAD) in combination with a Steam-Jet Aerosol Collector (SJAC) followed by suitable on-line analysis. A detailed description and verification of the inlet system for simultaneous sampling of soluble gases and aerosol compounds is presented. Overall measurement uncertainties of the ambient mixing ratios usually remained below 15%. The limit of detection (LOD) was determined for each single data point measured during the field experiment. Median LOD values (3-sigma-definition) were less than or equal to 0.015 ppb for acidic trace gases and aerosol anions and less than or equal to 0.118 ppb for NH₃ and aerosol NH₄⁺. Mixing ratios of acidic trace gases remained below 1 ppb throughout the measurement period, while NH₃ levels were an order of magnitude higher. Accordingly, mixing ratios of NH₄⁺ exceeded those of other inorganic aerosol contributors by a factor of 4 to 10. During the wet season, mixing ratios decreased by nearly a factor of 3 for all

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compounds compared to those observed when intensive biomass burning took place. Additionally, N-containing gas and aerosol species featured pronounced diel variations. This is attributed to strong relative humidity and temperature variations between day and night as well as to changing photochemistry and stability conditions of the planetary boundary layer. HONO exhibited a characteristic diel cycle with high mixing ratios at nighttime and was not completely depleted by photolysis during daylight hours. [References: 113]

Publication Type

Review

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<http://gateway.ovid.com/ovidweb.cgi?T=JS&MODE=ovid&PAGE=fulltext&NEWS=n&D=ccse&AUTOALERT=1083814007c73>

<74>

Authors

Darmadi-Blackberry I. Wahqvist ML. Kouris-Blazos A. Steen B. Lukito W. Horie Y. Horie K.

Title

Legumes: the most important dietary predictor of survival in older people of different ethnicities

Source

Asia Pacific Journal of Clinical Nutrition. 13(2):217-220, 2004.

Abstract

To identify protective dietary predictors amongst long-lived elderly people (N=785), the "Food Habits in Later Life" (FHILL) study was undertaken among five cohorts in Japan, Sweden, Greece and Australia. Between 1988 and 1991, baseline data on food intakes were collected. There were 785 participants aged 70 and over that were followed up to seven years. Based on an alternative Cox Proportional Hazard model adjusted to age at enrolment (in 5-year intervals), gender and smoking, the legume food group showed 7-8% reduction in mortality hazard ratio for every 20g increase in daily intake with or without controlling for ethnicity (RR 0.92; 95% CI 0.85-0.99 and RR 0.93; 95% CI 0.87-0.99, respectively). Other food groups were not found to be consistently significant in predicting survival amongst the FHILL cohorts. [References: 20]

Publication Type

Article

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<75>

Authors

Acar D. Cayan S. Bozlu M. Akbay E.

Title

Is routine hormonal measurement necessary in initial evaluation of men with erectile dysfunction?

Source

Archives of Andrology. 50(4):247-253, 2004 Jul-Aug.

Abstract

To prospectively compare serum hormone levels and the incidence of hormonal pathologies between men with and without erectile dysfunction, and investigate risk factors that might predict hormonal pathologies in men complaining of erectile dysfunction. The study included 262 men with erectile dysfunction and 53 healthy men with no erectile dysfunction as a control group. All men enrolled in the study were evaluated with a detailed history, physical examination, international index of erectile function (IIEF-5), and serum hormone measurement. Hypotestosteronemia was

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considered as serum total testosterone value of <3 ng/mL, and hyperprolactinemia was considered as serum prolactin level of >18 ng/mL. Serum hormone levels and the incidence of hormonal abnormalities were compared between the two groups. In addition, risk factors for hormonal abnormalities were investigated. There were no significant differences in the mean serum FSH ($p=0.212$), LH ($p=0.623$), testosterone ($p=0.332$) and prolactin values ($p=0.351$) between the men with and without erectile dysfunction. Hypotestosteronemia was detected in 29 (11%) of the erectile dysfunction group and in 2 (3.7%) of the control group, revealing no significant difference ($p = 0.104$). Hyperprolactinemia was detected in 25 (9.5%) of the erectile dysfunction group and in 2 (3.7%) of the control group, revealing no significant difference ($p = 0.171$). To investigate risk factors that might predict hormonal pathologies, there were no significant differences in the patient age, duration of the sexual dysfunction, smoking history and duration, the presence of chronic disease and the type of erectile dysfunction. Our findings suggest that hormonal measurement should not be routinely performed in the initial evaluation of men presenting with erectile dysfunction, and may be necessary based only on the findings obtained with a careful history and physical examination. [References: 24]

Publication Type
Article

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<http://gateway.ovid.com/ovidweb.cgi?T=JS&MODE=ovid&PAGE=FullText&NEWS=n&D=ccse&AUTOA=LERT=108381400%7C75>

<76>

Authors

Ruel M. Masters RG. Rubens FD. Bedard PJ. Pipe AL. Goldstein WG.
Hendry PJ. Mesana TG.

Title

Late incidence and determinants of stroke after aortic and mitral valve replacement

Source

Annals of Thoracic Surgery. 78(1):77-84, 2004 Jul.

Abstract

Background. Stroke is a devastating complication in patients with prosthetic valves, but characterization of its late occurrence from a large cohort is lacking.

Methods. Three thousand one hundred eighty-nine adult patients who underwent a total of 3,576 operations for left-heart valve replacement were managed with contemporary anticoagulation, guidelines and prospectively followed in a dedicated clinic. Total follow-up was 20,096 patient-years. Bootstrapped survival analysis was used to determine the impact of patient and valve related factors on the incidence of stroke.

Results. Most strokes were embolic. Linearized embolic stroke rates were 1.3% +/- 0.2% per year for aortic bioprostheses, 1.4% +/- 0.2% per year for aortic mechanical valves, 1.3% +/- 0.3% per year for mitral bioprostheses, and 2.3% +/- 0.4% per year for mitral mechanical valves ($p = 0.002$, vs other implant types). Age more than 75 years, female gender, and smoking were independent risk factors after aortic and mitral valve replacement. Atrial fibrillation, coronary disease, and tilting-disc mechanical prostheses were independent predictors of embolic stroke after aortic valve replacement. Preoperative left ventricular (LV) dysfunction was an independent risk factor in patients with mitral prostheses. Primary operative indication, diabetes, redo status, or the presence of two prosthetic valves were not associated with an increased hazard. The addition of acetyl salicylic or dipyridamole to warfarin anticoagulation did not significantly lower embolic stroke risk in patients with

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mechanical prostheses.

Conclusions. Approximately 20% of patients with valve prostheses have an embolic stroke by 15 years after valve replacement. Some risk factors such as the avoidance of smoking, mitral mechanical prostheses, aortic tilting-disc valves, and proceeding to mitral surgery before LV dysfunction occurs are potentially modifiable. (C) 2004 by The Society of Thoracic Surgeons. [References: 26]

Publication Type
Article

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<http://gateway.ovid.com/ovidweb.cgi?T=JS&MODE=ovid&PAGE=FullText&NEWS=n&D=ccse&AUTOA=LERT=108381400%7C76>

<77>

Authors

Samcova E. Marhol P. Opekar F. Langmaier J.

Title

Determination of urinary 8-hydroxy-2'-deoxyguanosine in obese patients by HPLC with electrochemical detection

Source

Analytica Chimica Acta. 516(1-2):107-110, 2004 Jul 19.

Abstract

A simple amperometric detector with a platinum tubular electrode was tested for the determination of urinary 8-hydroxy-2'-deoxyguanosine (8-OHdG) by high-performance liquid chromatography. Analyte was extracted from human urine using a single-step solid-phase extraction with the average recovery of 71 +/- 7%. Analysis was carried out on a C-18 analytical column under isocratic conditions. The limit of detection of 8-OHdG of 3 nM (S/N = 3) was comparable with that achieved using the conventional amperometric detector. Procedure was used for the determination of 8-OHdG levels in 10 obese patients (body-mass index > 30 kg m⁻²) yielding the mean concentration 32 +/- 27.1 nM of 8-OHdG or 1.85 +/- 0.72 nmol 8-OHdG mol⁻¹ creatinine (4.63 +/- 1.8 mug 8-OHdG g⁻¹ creatinine), which is not much different from the levels found in healthy individuals. (C) 2004 Elsevier B.V. All rights reserved. [References: 20]

Publication Type
Article

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<http://gateway.ovid.com/ovidweb.cgi?T=JS&MODE=ovid&PAGE=FullText&NEWS=n&D=ccse&AUTOA=LERT=108381400%7C77>

<78>

Authors

Brody AL. Olmstead RE. London ED. Farahi J. Meyer JH. Grossman P.
Lee GS. Huang J. Hahn EL. Mandelkern MA.

Title

Smoking-induced ventral striatum dopamine release

Source

American Journal of Psychiatry. 161(7):1211-1218, 2004 Jul.

Abstract

Objective: Substantial evidence from animal models demonstrates that dopamine release in the ventral striatum underlies the reinforcing properties of nicotine. The authors used [¹¹C-11]raclopride bolus-plus-continuous-infusion positron emission tomography (PET) to determine smoking-induced ventral striatum dopamine release in humans.

Method: Twenty nicotine-dependent smokers (who smoked greater than or equal to 15 cigarettes/day) underwent a [¹¹C-11]raclopride

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bolus-plus-continuous-infusion PET session. During the session, subjects had a 10-minute break outside the PET apparatus during which 10 subjects smoked a cigarette and 10 did not smoke (as a control condition).

Results: The group that smoked had greater reductions in [11 C]-raclopride binding potential in ventral striatum regions of interest than the group that did not smoke, particularly in the left ventral caudate/nucleus accumbens and left ventral putamen (range for smoking group -25.9% to -36.6% reduction). Significant correlations were found between change from before to after the smoking break in craving ratings and change from before to after the break in binding potential for these two regions.

Conclusions: Nicotine-dependent subjects who smoked during a break in PET scanning had greater reductions in [11 C]-raclopride binding potential (an indirect measure of dopamine release) than nicotine-dependent subjects who did not smoke. The magnitude of binding potential changes was comparable to that found in studies that used similar methods to examine the effects of other addictive drugs. [References: 69]

Publication Type
Article

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<http://gateway.ovid.com/ovidweb.cgi?T=JS&MODE=ovid&PAGE=fulltext&NEWS=n&D=ccse&AUTOA LERT=108381400%7c78>

<79>

Authors

Weiser M. Reichenberg A. Grotto I. Yasvitzky R. Rabinowitz J. Lubin G. Nahon D. Knobler HY. Davidson M.

Title

Higher rates of cigarette smoking in male adolescents before the onset of Schizophrenia: A historical-prospective cohort study

Source

American Journal of Psychiatry. 161(7):1219-1223, 2004 Jul.

Abstract

Objective: The prevalence of cigarette smoking among schizophrenia patients is significantly higher than in the general population; this may reflect self-medication of symptoms and/or adverse effects of neuroleptics. The authors examined the prevalence of cigarette smoking in apparently healthy adolescents later hospitalized for schizophrenia.

Method: Each year, a random sample of male Israeli military recruits, who have been screened and found not to be suffering from major psychopathology, complete a smoking questionnaire. Through the Israeli National Psychiatric Hospitalization Case Registry, 14,248 of these adolescents were followed to determine later psychiatric hospitalization.

Results: Of the 14,248 adolescents assessed, 4,052 (28.4%) reported smoking at least one cigarette a day. Over a 4-16-year follow-up, the prevalence of schizophrenia in the entire cohort was 0.3% (N = 44). Smokers were at greater risk for later schizophrenia; the adjusted relative risk was 1.94, and the 95% confidence interval (CI) was 1.05-3.58. The number of cigarettes smoked was significantly associated with the risk for schizophrenia. Compared to nonsmokers, adolescents who smoked 1-9 cigarettes/day were 1.38 times (95% CI=0.48-4.00) as likely to be hospitalized later for schizophrenia, and adolescents who smoked 10 cigarettes/day or more were 2.28 times (95% CI=1.19-4.34) as likely; the latter difference was statistically significant.

Conclusions: Taken together with the existing data on abnormalities in nicotinic transmission in patients and their relatives, this higher prevalence of smoking in future schizophrenia patients, before the onset

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of their illness, might indicate that impaired nicotinic neurotransmission is involved in the pathophysiology of schizophrenia. [References: 51]

Publication Type

Article

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<80>

Authors

Audrain-McGovern J. Lerman C. Wileyto EP. Rodriguez D. Shields PG.

Title

Interacting effects of genetic predisposition and depression on adolescent smoking progression

Source

American Journal of Psychiatry. 161(7):1224-1230, 2004 Jul.

Abstract

Objective: The goal of the present study was to identify specific genetic associations with smoking progression in adolescents and to determine whether these genetic effects on smoking practices are potentiated by depression symptoms.

Method: Effects of dopamine transporter (SLC6A3) and dopamine receptor (DRD2) genetic variants on smoking progression were evaluated in a cohort of 615 adolescents, including those who had never smoked, and in a subgroup including only adolescents who had been exposed to nicotine (i.e., smoked at least a puff of a cigarette) (N=292). These adolescents were followed from 9th to 11th grade. Depression symptoms were also assessed.

Results: In the model of adolescents with a previous smoking experience, the likelihood of progressing to a higher level of smoking by the 11th grade increased almost twofold with each additional DRD2 A1 allele. The likelihood of smoking progression with each additional A1 allele was more pronounced among adolescents with substantial depression symptoms. The model including never-smokers revealed no significant genetic effects. Neither model revealed effects of SLC6A3.

Conclusions: These results provide the first evidence, to the authors' knowledge, for an association of the DRD2 A1 allele with smoking progression among adolescents. This effect is potentiated by depression symptoms. These effects appear to be specific to adolescents who have had at least some nicotine exposure (i.e., at least a puff of a cigarette). [References: 60]

Publication Type

Article

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<http://gateway.ovid.com/ovidweb.cgi?T=JS&MODE=ovid&PAGE=fulltext&NEWS=n&D=ccse&AUTOA LERT=108381400%7c80>

<81>

Authors

do Prado-Lima PAS. Chatkin JM. Tauber M. Oliveira G. Silveira E. Neto CA. Haggstram F. Bodanese LC. da Cruz IBM.

Title

Polymorphism of 5HT_{2A} serotonin receptor gene is implicated in smoking addiction

Source

American Journal of Medical Genetics Part B-Neuropsychiatric Genetics.

Page 54

128B(1):90-93, 2004 Jul 1.

Abstract

Smoking behavior is influenced by genetic factors. Polymorphisms affecting the dopaminergic system have been linked to smoking habits. The aim of this study was to investigate if the T102C polymorphism of the 5-HT2A receptor gene is related to tobacco use, since this receptor modulates the mesolimbic dopamine system and the C allele is associated with reduced receptor gene expression. A sample of 625 subjects were geno-typed and classified according to their smoking behavior (never, former, or current smokers). We found differences in the distribution of the genotypes when the current smokers were compared with the never + former smokers, suggesting that T102C polymorphism is associated with maintenance, but not with initiation of the smoking habit. The CC genotype was more frequent in the current smokers than in the never + former smokers ($\chi^2(2) = 6.825$, $P = 0.03$). The odds ratio of being a current smoker with a CC genotype was 1.63, 95% CI 1.06-2.51. (C) 2004 Wiley-Liss, Inc. [References: 18]

Publication Type
Article

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<http://gateway.ovid.com/ovidweb.cgi?T=JS&MODE=ovid&PAGE=fulltext&NEWS=n&D=ccse&AUTOA LERT=108381400%7c81>

<82>

Authors

Gelernter J. Liu XX. Hesselbrock V. Page GP. Goddard A. Zhang HP.

Title

Results of a genome-wide linkage scan: Support for chromosomes 9 and 11 loci increasing risk for cigarette smoking

Source

American Journal of Medical Genetics Part B-Neuropsychiatric Genetics. 128B(1):94-101, 2004 Jul 1.

Abstract

Cigarette smoking is highly destructive to individuals and society, and is moderately heritable. We completed a genome-wide linkage scan to map loci increasing risk for cigarette smoking in a set of families originally identified because they segregate panic disorder (PD). One hundred forty two genotyped individuals in a total of 12 families were studied (214 subjects analyzed, including non-genotyped individuals). Of these individuals, 69 were "affected" with habitual cigarette smoking (i.e., they smoked more than one pack per day for at least a year, or at least 1/2 pack per day for at least 10 years), 49 were "unaffected" (i.e., they smoked less than 1/2 pack per day for less than 1 year), and 24 were scored as "unknown." Nine families from the panic series were excluded from these analyses because they lacked multiple affected individuals with habitual cigarette smoking. In an initial genome-wide scan, we genotyped a total of 416 markers (398 autosomal, 18 X-chromosome) with an average spacing of less than 10 cM, spanning the genome. Linkage analysis (pairwise, or single-point, and multi-point) was performed using ALLEGRO. An additional 14 markers were genotyped in a high-density panel to follow-up on an identified region of interest on chromosome 11p. The three highest multipoint Zlr scores (3.43, 3.04, and 3.01; $P=0.0003$, $P=0.0012$, and $P=0.0013$, respectively), which each reflect "suggestive" evidence for linkage, were observed in multi-point linkage analyses using Allegro on chromosomes 11p and 9, near markers D11S4046, D9S283, and D9S1677, respectively. D11S4046 is in a region where linkage to alcohol dependence and linkage disequilibrium to substance dependence have previously been identified. The chromosome 9 region we identified as possibly linked to cigarette smoking in anxiety families, was previously identified as significantly linked to PD in Icelandic pedigrees. We also identified evidence supporting linkage (Zlr score > 2.3 , $P < 0.01$) to regions of chromosomes 14, 16, and X. There was a significant phenotypic association

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between PD and cigarette smoking ($P < 0.001$). Conclusions: We identified evidence for two loci increasing risk for cigarette smoking that map to chromosomes 9 and 11. There is now evidence supporting linkage or association of chromosome 11 markers with alcohol dependence, illegal drug abuse and dependence, and cigarette smoking. Interestingly, one of our most promising linkage regions, includes a region previously identified as linked to PD. (C) 2004 Wiley-Liss, Inc. [References: 35]

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<http://gateway.ovid.com/ovidweb.cgi?T=JS&MODE=ovid&PAGE=fulltext&NEWS=n&D=ccse&AUTOA LERT=108381400%7c82>

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Authors

Marteau T. Senior V. Humphries SE. Bobrow M. Cranston T. Crook MA. Day L. Fernandez M. Horne R. Iversen A. Jackson Z. Lynas J. Middleton-Price H. Savine R. Sikorski J. Watson M. Weinman J. Wierzbicki AS. Wray R.

Title

Psychological impact of genetic testing for familial hypercholesterolemia within a previously aware population: A randomized controlled trial

Source

American Journal of Medical Genetics Part A. 128A(3):285-293, 2004 Jul 30.

Abstract

This trial tests the hypothesis that confirming a clinical diagnosis of familial hypercholesterolemia (FH) by finding a genetic mutation reduces patients' perceptions of control over the disease and adherence to risk-reducing behaviors. Three hundred forty-one families, comprising 341 hypercholesterolemia probands and 128 adult relatives, were randomized to one of two groups: (a) routine clinical diagnosis; (b) routine clinical diagnosis plus genetic testing (mutation searching in probands and direct gene testing in relatives). The main outcome measures were perceptions of control over hypercholesterolemia, adherence to cholesterol-lowering medication, diet, physical activity, and smoking. There was no support for the main hypothesis: finding a mutation had no impact on perceived control or adherence to risk-reducing behavior (all P -values > 0.10). While all groups believed that lowering cholesterol was an effective way of reducing the risk of a heart attack, participants in whom a mutation was found believed less strongly in the efficacy of diet in reducing their cholesterol level ($P = 0.02$ at 6 months) and showed a trend in believing more strongly in the efficacy of cholesterol-lowering medication ($P = 0.06$ at 6 months). In conclusion, finding a mutation to confirm a clinical diagnosis of FH in a previously aware population does not reduce perceptions of control or adherence to risk-reducing behaviors. The pattern of findings leads to the new hypothesis that genetic testing does not affect the extent to which people feel they have control over a condition, but does affect their perceptions of how control is most effectively achieved. Further work is needed to determine whether similar results will be obtained in populations with little previous awareness of their risks. (C) 2004 Wiley-Liss, Inc. [References: 37]

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<http://gateway.ovid.com/ovidweb.cgi?T=JS&MODE=ovid&PAGE=fulltext&NEWS=n&D=ccse&AUTOA LERT=108381400%7c83>

<84>

Authors

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Gomez MI. Hwang SA. Lin S. Stark AD. May JJ. Hallman EM.

Title
Prevalence and predictors of respiratory symptoms among New York farmers and farm residents

Source
American Journal of Industrial Medicine. 46(1):42-54, 2004 Jul.

Abstract
Background Data from telephone interviews with New York farmers and farm residents were used to study the prevalence and risk factors of symptoms that could be related to asthma and allergies.

Methods Participants were asked if they had wheezing or whistling in the chest in the past year and about the occurrence of stuffy, itchy, runny nose or watery, itchy eyes in the past year.

Results The prevalence of wheeze was 18.2% and of stuffy nose/watery eyes was 37.4% (N = 1,620). Significant risk factors for wheeze were cigarette smoking, a systemic reaction to allergy skin testing, immunotherapy, or insect sting, reactivity to a pet, having goats, and more acreage in corn for silage. Significant risk factors of stuffy nose/watery eyes were younger age, having more than a high school education, being a worker on the farm, and having done spraying.

Conclusions Wheeze maybe indicative of existing or latent asthma, a potentially limiting respiratory illness. Stuffy, itchy, runny nose or watery, itchy eyes, which may cause irritation and discomfort, may also indicate an increased sensitivity to respirable dusts and chemicals. This cohort of New York farmers had significant farm-related risk factors for wheeze and stuffy nose/watery eyes. (C) 2004 Wiley-Liss, Inc. [References: 23]

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Authors

Li RL. Lyn D. Lapu-Bula R. Oduwale A. Igho-Pemu P. Lankford B. Morgan A. Nkemdechi S. Liu G. Pack C. Silvestrov N. von Deutsch DA. Song Q. Abukhalaf IK. Ofili E.

Title
Relation of endothelial nitric oxide synthase gene to plasma nitric oxide level, endothelial function, and blood pressure in African Americans

Source
American Journal of Hypertension. 17(7):560-567, 2004 Jul.

Abstract
Background: The role of eNOS gene polymorphisms on plasma nitrite or nitrate (NOx) level, endothelial function, and blood pressure (BP) remains unclear.

Methods: We estimated the relationship of eNOS polymorphisms (the T-C-786 in the 5'-flanking promoter region, T-C-786; 27-bp repeat in intron 4, eNOS4; and Glu298Asp in exon 7, G894T) with plasma NOx level, brachial endothelial function assessed by ultrasound measure of brachial artery flow-mediated dilation (FMD), and BP in 60 healthy African Americans, 30 men and 30 women aged 18 to 73 years.

Results: Among them, 73.1%, 23.9%, and 3.0% carried TT, TC, and CC of T-C-786, respectively, 14.5%, 27.5%, 53.6%, and 1.4% carried aa, ab, bb, and bc of eNOS4 polymorphism, respectively, and 70.4%, 23.9%, and 5.6%
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carried GG, GT, and TT of G894T, respectively. G894T and eNOS4 were observed in linkage disequilibrium, FMD, systolic and Mean values of age, plasma NO, diastolic BPs were not significantly different ($P > .05$) by eNOS polymorphisms. Plasma NOx level was found to be associated with systolic BP ($r = 0.51$, $P = .03$), and diastolic BP ($r = 0.41$, $P = .08$), but not with FMD, in individuals with "a" allele of eNOS4 polymorphism after adjustment for age, body mass index, serum glucose, and smoking status.

Conclusions: We reveal a positive association between plasma NOx level and BP in normotensive African Americans who carry the "a" allele of eNOS4. Because the frequency of the rare allele "a" is significantly higher in African Americans than in other ethnic groups, this finding may provide a clue to understanding the genetic susceptibility to hypertension in African Americans. (C) 2004 American Journal of Hypertension, Ltd.

[References: 34]
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<86>

Authors

Benderlioglu Z. Scialli PW. Nelson RJ.

Title

Fluctuating asymmetry predicts human reactive aggression

Source

American Journal of Human Biology. 16(4):458-469, 2004 Jul-Aug.

Abstract

Fluctuating asymmetry (FA) represents non-directional deviations from perfect symmetry in morphological characters. Prenatal stressors contribute to the imprecise expression of symmetrical phenotypes and display of agonistic behavior in children and adults. Because prenatal stress affects neurological function and overt behavior, and FA is often used as a marker for prenatal stress, we hypothesized that high FA would be associated with elevated levels of human reactive aggression. Data were collected from 100 males and females (average age = 20.1) on FA of 11 bilateral traits (second, third, fourth, and fifth digit length, palm height, wrist diameter, elbow width, ear height, ear width, foot breadth, and ankle circumference). Additional relationships were also investigated among FA, testosterone (T), and type of provocation to test a comprehensive aggression model. Experimental participants solicited donations for a fictitious charity organization via telephone and selected follow-up letters after the calls. High FA and T values were independently associated with elevated reactive aggression (force of terminating the call) under low provocation in males, and under high provocation in females. In the absence of phenotypical markers, i.e., FA and T, sex differences in response to provocation disappeared and a "passive-aggressive" response emerged. Both males and females selected hostile follow-up letters, but showed low reactive aggression when terminating the call under high provocation. This pattern was reversed under low provocation. Taken together, these data suggest that individuals' phenotype and intensity of provocation are important determinants of individual and sex differences in aggression. (C) 2004 Wiley-Liss, Inc. [References: 91]

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Authors

Stene LC, Barriga K, Norris JM, Hoffman M, Erlich HA, Eisenbarth GS, McDuffie RS, Rewers M.

Title

Perinatal factors and development of islet autoimmunity in early childhood - The diabetes autoimmunity study in the young

Source

American Journal of Epidemiology. 160(1):3-10, 2004 Jul 1.

Abstract

The objective of this study was to test whether maternal age at delivery, child's birth order, cesarean section, complicated delivery, maternal smoking during pregnancy, or neonatal jaundice predict islet autoimmunity in children at genetically increased risk of type 1 diabetes in a birth cohort with blood draws at ages 9, 15, and 24 months and yearly thereafter. Newborns with diabetes-associated human leukocyte antigen genotypes ($n = 938$) and offspring or siblings of persons with type 1 diabetes ($n = 428$) from the Denver, Colorado, metropolitan area were examined from January 1994 to February 2003. Information on perinatal factors was collected by using questionnaires soon after the birth. Islet autoimmunity was defined as positivity for greater than or equal to 1 autoantibody to glutamic acid decarboxylase(65), insulin, or protein tyrosine phosphatase-2/ICA512 at greater than or equal to 2 consecutive visits ($n = 52$; mean follow-up, 3.9 years). Complicated delivery (breech, forceps, vacuum extraction) predicted a higher risk of islet autoimmunity (hazard ratio = 2.10, 95% confidence interval: 1.09, 4.05). Increasing maternal age was related to risk of islet autoimmunity among first-degree relatives of persons with type 1 diabetes (hazard ratios = 3.96 and 8.88 for maternal ages 25-34 and greater than or equal to 35 years, respectively, compared with <25 years; p for trend = 0.008. Other factors evaluated were not related to risk of islet autoimmunity. In conclusion, influences in utero or during delivery may affect the fetal immune system. [References: 26]

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<88>

Authors

West J, Logan RFA, Card TR, Smith C, Hubbard R.

Title

Risk of vascular disease in adults with diagnosed coeliac disease: a population-based study

Source

Alimentary Pharmacology & Therapeutics. 20(1):73-79, 2004 Jul 1.

Abstract

Background: It has been suggested that vascular disease mortality may be reduced in coeliac disease because of lower levels of blood pressure, cholesterol and body mass.

Aim: To examine whether people with coeliac disease are at reduced risk of various vascular diseases.

Methods: We identified 3790 adults with diagnosed coeliac disease and 17 925 age- and sex-matched controls in the General Practice Research Database. We estimated odds ratios for diagnosed hypertension, hypercholesterolaemia and atrial fibrillation and hazard ratios for

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myocardial infarction and stroke.

Results: Adults with coeliac disease, compared with controls, were less likely to have had a diagnosis of hypertension [11% vs. 15%, odds ratio 0.68 (95% confidence interval: 0.60-0.76)] or hypercholesterolaemia [3.0% vs. 4.8%, odds ratio 0.58 (95% confidence interval: 0.47-0.72)] but slightly more likely to have had atrial fibrillation [2.1% vs. 1.7%, odds ratio 1.26 (95% confidence interval: 0.97-1.64)]. The hazard ratio for myocardial infarction was 0.85 (95% confidence interval: 0.63-1.13), while the hazard ratio for stroke was 1.29 (95% confidence interval: 0.98-1.70).

Conclusions: Although rates of myocardial infarction and stroke were not substantially different, adults with coeliac disease do have a lower prevalence of hypertension and hypercholesterolaemia compared with the general population. The effect of a gluten-free diet on cardiovascular risk factors should be determined before any screening programmes for coeliac disease are instituted. [References: 27]

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<89>

Authors

Moos RH, Schutte K, Brennan P, Moos BS.

Title

Ten-year patterns of alcohol consumption and drinking problems among older women and men

Source

Addiction. 99(7):829-838, 2004 Jul.

Abstract

Aims This study focused on changes in 10-year patterns of alcohol consumption among older women and men, late-life and life history predictors of drinking problems, and gender differences in these predictors.

Design, setting, participants A sample of late-middle-aged community residents ($N = 1291$) who had consumed alcohol in the past year or shortly before was surveyed at baseline and 1 year, 4 years and 10 years later.

Measurements At each contact point, participants completed an inventory that assessed their alcohol consumption, drinking problems and health-related and life context factors. Participants also provided information about their life history of drinking.

Results Over the 10 years, the proportion of individuals who consumed alcohol declined. Among individuals who continued to drink, women and men showed comparable declines in alcohol consumption, minor concomitants of alcohol consumption and drinking problems. In addition to the amount of alcohol consumption, smoking, friends' approval of drinking and avoidance coping consistently predicted late-life drinking problems. With respect to life history factors, heavy drinking, drinking problems and increased drinking in response to life events were related to a higher likelihood of late-life drinking problems; obtaining help from family members and friends and, among men, participation in Alcoholics Anonymous, were related to a lower likelihood of problems.

Conclusion Older women and men show comparable declines in alcohol consumption and drinking problems. Specific late-life social context and coping variables, and life history indices, are risk factors for late-life

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drinking problems among both women and men. [References: 59]
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Article

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Authors

Baker A. Lee NK. Claire M. Lewin TJ. Grant T. Pohlman S. Saunders JB. Kay-Lambkin F. Constable P. Jenner L. Carr VJ.

Title

Drug use patterns and mental health of regular amphetamine users during a reported 'heroin drought'

Source

Addiction. 99(7):875-884, 2004 Jul.

Abstract

Aims The present study extends the findings of a pilot study conducted among regular amphetamine users in Newcastle, NSW, in 1998. It compares key features between current participants in a state capital city (Brisbane) and a regional city (Newcastle) and between the 1998 and current Newcastle sample.

Design Cross-sectional survey.

Setting Brisbane and Newcastle, Australia.

Participants The survey was conducted among 214 regular amphetamine users within the context of a randomized controlled trial of brief interventions for amphetamine use.

Measurements Demographic characteristics, past and present alcohol and other drug use and mental health, treatment, amphetamine-related harms and severity of dependence.

Findings The main findings were as follows: (i) the rate of mental health problems was high among regular amphetamine users and these problems commonly emerged after commencement of regular amphetamine use; (ii) there were regional differences in drug use with greater accessibility to a wider range of drugs in a state capital city and greater levels of injecting risk-taking behaviour outside the capital city environment; and (iii) there was a significant increase in level of amphetamine use and percentage of alcohol users, a trend for a higher level of amphetamine dependence and a significant reduction in the percentage of people using heroin and benzodiazepines among the 2002 Newcastle cohort compared to the 1998 cohort.

Conclusions Further longitudinal research is needed to elucidate transitions from one drug type to another and from recreational to injecting and regular use and the relationship between drug use and mental health in prospective studies among users.

Implications Intervention research should evaluate the effectiveness of interventions aimed at: preventing transition to injecting and regular use of amphetamines; toward reducing levels of depression among amphetamine users and interventions among people with severe psychopathology and personality disorders; and toward reducing the prevalence of tobacco dependence among amphetamine users. [References: 43]

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Article

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<91>

Authors

Wakefield M. Kloska DD. O'Malley PM. Johnston LD. Chaloupka F. Pierce J. Giovino G. Ruel E. Flay BR.

Title

The role of smoking intentions in predicting future smoking among youth: findings from Monitoring the Future data

Source

Addiction. 99(7):914-922, 2004 Jul.

Abstract

Aims To demonstrate that intentions predict long-term future levels of smoking, irrespective of level of past smoking experience. A growing body of research suggests that intentions about future smoking might play an important role in addition to the influence of past smoking experience on the likelihood of smoking in future.

Design Using logistic regression analyses, we assessed the relationship between baseline smoking experience and a firm intention 'not to be smoking cigarettes 5 years from now' with four outcome measures of smoking at follow-up: 30-day smoking at a 3/4- and 5/6-year follow-up and current established smoking (self-described regular smokers or former smokers who had smoked in the past 30 days) at a 3/4- and 5/6-year follow-up.

Participants US nationally representative samples of 12th graders who responded to the Monitoring the Future (MTF) survey from the years 1976 to 1993, inclusive. For these panels, we linked stage of smoking and intentions at 12th grade to follow-up measures of smoking collected at 3/4 years after baseline and 5/6 years after baseline.

Findings Analysis of 3/4-year follow-up data (weighted n = 4544) and 5/6-year follow-up data (weighted n = 3885) for both definitions of smoking outcome indicated that there was a dose-response relationship between levels of baseline smoking experience and the likelihood of future smoking. In addition, independent of baseline smoking experience, there was a statistically significant protective effect for a firm intention not to smoke in five year's time on future smoking behavior.

Conclusions The findings suggest that evaluative studies of tobacco control policies and programs might usefully employ smoking uptake categories that incorporate smoking intentions as early indicators of outcome. [References: 21]

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Article

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<92>

Authors

W-dahl A. Toksvig-Larsen S.

Title

Cigarette smoking delays bone healing - A prospective study of 200 patients operated on by the hemicallotasis technique

Source

Acta Orthopaedica Scandinavica. 75(3):347-351, 2004 Jun.

Abstract

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2004 week 32.txt

Background Cigarette smoking is known to impede bone healing. The hemicallotasis technique is based on an external fixation and delayed healing prolongs treatment and increases the risk of further complications.

Patients and methods 200 patients, 34 smokers and 166 nonsmokers, operated on by the hemicallotasis technique in the proximal tibia for deformities of the knee (knee arthrosis in 186 patients) were consecutively studied. We recorded their preoperative smoking habits, postoperative complications and the duration of treatment with external fixation.

Results Half of the smokers and one fifth of the nonsmokers developed complications. Their mean time in external fixation was 96 (SD 20) days. Smokers required an average of 16 days more in external fixation. Delayed healing and pseudoarthrosis were commoner in smokers than nonsmokers. The risk ratio for smokers to develop complications was 2.5, as compared to nonsmokers. [References: 16]

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<93>

Authors

Deepa R. Pradeepa R. Shanthirani CS. Mohan V.

Title

Association of hypertension with cluster of insulin resistance syndrome factors: the Chennai Urban Population Study (CUPS-12)

Source

Acta Diabetologica. 41(2):49-55, 2004 Jun.

Abstract

The objective of this study was to investigate the association of insulin resistance and the cluster of insulin resistance syndrome (IRS) factors with hypertension in a native urban population from southern India. The Chennai Urban Population Study (CUPS) is an epidemiological study involving two residential areas in Chennai in southern India. Of the total of 1399 eligible subjects (age greater than or equal to 20 years), 1262 (90.2%) participated in the study. Subjects were classified as hypertensives if they had systolic blood pressure (SBP) greater than or equal to 140 mmHg or diastolic blood pressure (DBP) greater than or equal to 90 mmHg, if they were known hypertensives, or if they were receiving treatment with antihypertensive drugs. Insulin resistance was computed using the homeostasis model assessment (HOMA IR). The overall prevalence of hypertension in the population was 22.1%. Prevalence of hypertension increased with an increase in quartiles of fasting insulin levels ($p=0.035$) and HOMA IR ($p=0.03$). Logistic regression analysis revealed that HOMA IR was significantly associated with hypertension, which was not altered even after addition of risk factors like age, smoking habit and alcohol consumption into the model. However, inclusion of variables associated with IRS abolished the association of insulin resistance with hypertension. Factor analysis identified four factors: factor 1 had positive loading of body mass index, age, systolic and diastolic blood pressures; factor 2 had positive loading of HOMA IR, fasting plasma glucose, triglycerides and body mass index; factor 3 had positive loading of waist-hip ratio, triglycerides and smoking habit and negative loading of alcohol consumption; factor 4 was loaded with age and serum cholesterol. Factor 1, the hypertension factor loaded with systolic and diastolic blood pressures, shared a correlation with the insulin resistance cluster through body mass index. Our results suggest that the "insulin resistance cluster" is associated with hypertension in this urban

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population of southern India. [References: 44]

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Article

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Authors

Weitzman S. Wang C. Rosamond WD. Chambless LE. Cooper LS. Shahar E. Goff DC.

Title

Is diabetes an independent risk factor for mortality after myocardial infarction? The ARIC (Atherosclerosis Risk in Communities) Surveillance Study

Source

Acta Diabetologica. 41(2):77-83, 2004 Jun.

Abstract

We investigated the age-, gender- and race-specific 1-year case fatality rates of diabetic and non-diabetic individuals with a myocardial infarction. Data were obtained from the Atherosclerosis Risk in Communities (ARIC) Surveillance Study, which monitors both hospitalized myocardial infarction and coronary heart disease (CHD) deaths in residents aged 35-74 years in four communities in the USA. The study population comprised 3242 hospitalized myocardial infarctions (MIs) in diabetic subjects and 9826 MIs in non-diabetic individuals between 1987 and 1997. Age-adjusted and gender- and race-specific odds ratios (OR) for 1-year case fatality comparing diabetic to non-diabetic patients were 2.0 (95% CI, 1.6-2.4) for white men and 1.4 (95% CI, 1.1-1.8) for white women. Further adjustment for severity of HMI, history of previous MI, stroke and hypertension, and therapy variables showed significantly higher case fatality in white diabetic men than in non-diabetic white men (OR=1.5; 95% CI, 1.2-1.9), but no significant association in the other race-gender groups. The age-adjusted odds of out of hospital death was significantly higher among white diabetic men (OR=1.7; 95% CI, 1.2-2.3), white women (OR=2.3; 95% CI, 1.4-3.8), and African-American women (OR=2.9; 95% CI, 1.5-5.9) as compared to their non-diabetic counterparts. In conclusion, diabetes is an independent factor for mortality within one year following a myocardial infarction among white men, and following out-of hospital coronary death in white men and women and in African-American women. It is possible that these differences could be explained, at least in part, by a less than optimal medical management of the high cardiovascular risk profile of these patients after hospital discharge. [References: 25]

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